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SOME FACTORS CONTRIBUTING TO THE SUCCESSFUL ADJUSTMENT OF CHILDREN PLACED FOR ADOPTION

A STUDY OF EIGHTEEN PLACEMENTS MADE BY THE NEW BEDFORD CHILD AND FAMILY SERVICE, 1946-1947

A Thesis

Submitted by

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In Partial Fulfillment of Requirements for
the Degree of Master of Science in Social Service

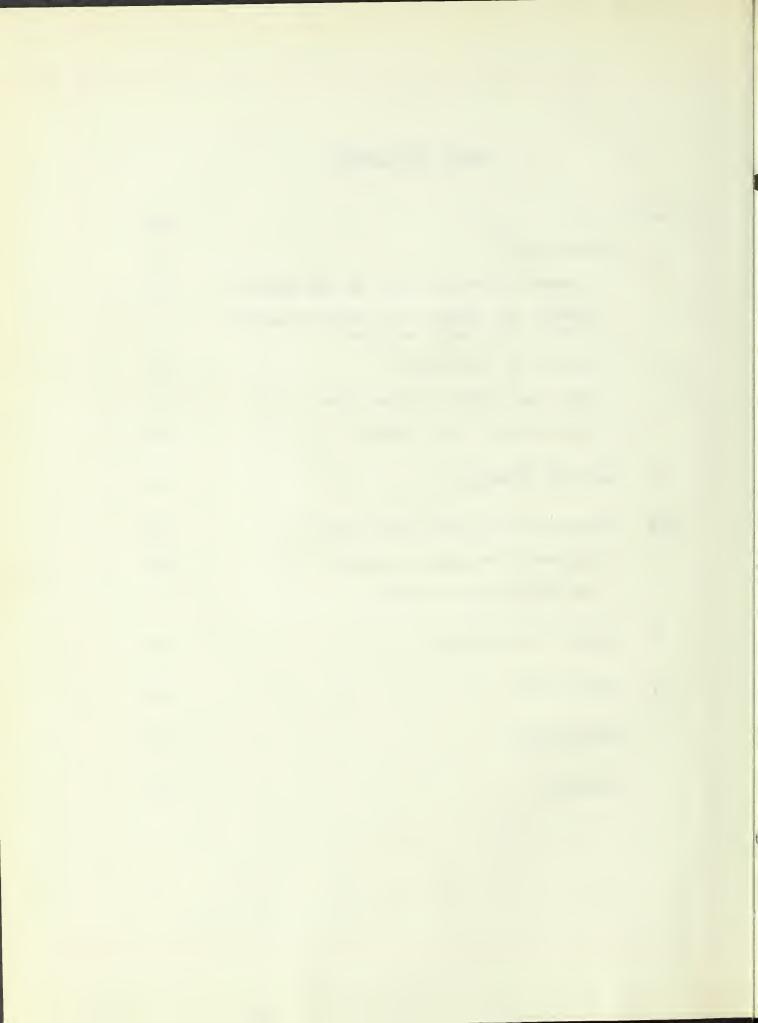
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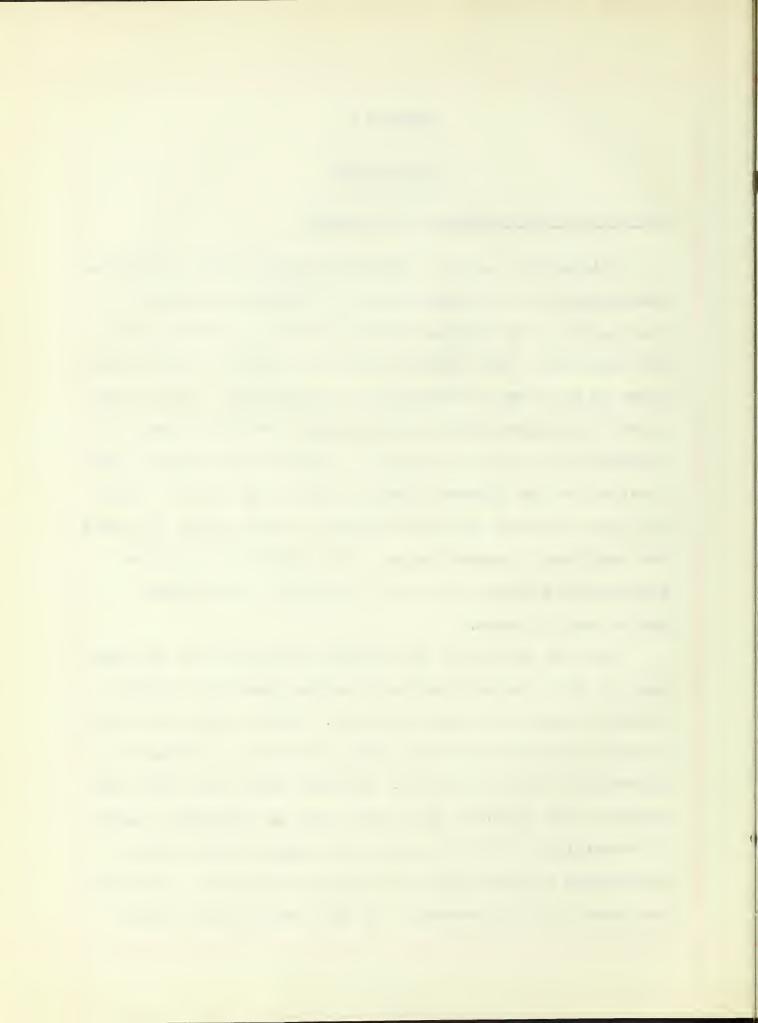
#### CHAPTER I

#### INTRODUCTION

### History and Description of New Bedford

Originally a part of Dartmouth, Massachusetts, which was incorporated by the General Court of Plymouth Colony on June 8, 1664, New Bedford was set off as a separate town in the year 1787. Even before that time, however, it had become known as the home of whalemen and shipbuilders. Sixty years after its original charter was granted, New Bedford was incorporated as a city, on March 18, 1847, and had gained distinction as "the greatest whaling port in the world". This industry continued to be New Bedford's chief source of income for more than a hundred years. The population in 1847 was approximately 16,000, and was, in general, one of great wealth and affluence.

With the decline of the whaling industry after the peak year of 1857, the manufacture of cotton yarns and textiles gradually became the major industry. During this period, the population expanded greatly, until, in 1920, it reached an approximate total of 121,000. Although there was still much wealth in New Bedford, there was, also, an increasing amount of destitution. In this period, the women of New Bedford established a pattern for work in the cotton mills, which has continued, with improvements, to the present day. Women,



even today, comprise the great bulk of mill employees. This pattern, of course, has had its effect on family life in New Bedford, as has, also, the new fishing industry.

Very early in its history, New Bedford became a cosmopolitan community. As the population increased, many different nationality groups settled in the city, with people of Portugese, French, Polish and Irish descent comprising the largest groups. In 1947, the total population was about 115,000. Greater New Bedford includes not only New Bedford proper, but, also, the neighboring towns of Acushnet, Dartmouth, and Fairhaven. 1

#### History of the New Bedford Child and Family Service

The New Bedford Child and Family Service is the result of the recent consolidation of the Children's Aid Society and the Family Welfare Society. For the purpose of this thesis, only that part of the history of the agency which bears upon direct services to children is presented.

The New Bedford Child and Family Service had its origin in one of the oldest social agencies in the city. In 1840, a few interested women of the community arranged to have certain needy children boarded in families. As few families became interested in this project, "little was accomplished

<sup>1</sup> William Emery, "An Historical Sketch", Official Program and Souvenir Book, New Bedford, Massachusetts Centennial Celebration, 1947, pp. 5-15.

during the years 1840 and 1841". On November 17, 1842, four children were "installed" in the newly opened New Bedford Children's Home, where ". . . not only the temporal but moral wants of the inmates could be supplied [] and the children[] by an entire removal from scenes of vice and wretchedness[] be educated with some hope of their becoming useful members of society". On May 9, 1843, the Orphan's Home was incorporated. In that year, a "trial" placement with a private family was made, but it was unsuccessful, and the child was returned to the home. This resulted in the Board's decision that children would not be placed "until their good habits were thoroughly confirmed and their bad ones were forgotten". 2

In 1845, it was reported that the children were attached to the matron and teacher at the Home, and were "governed by love, more than by fear". Two children were placed out "on trial" that year, the oldest between ten and eleven years of age, "to assist in farming and to be brought up to that occupation". In the following year, two children were adopted, and one, placed as an apprentice. During that year, also, "great inconvenience having been experienced from the inability of the Board to bind (indenture) children, an

<sup>2</sup> Board of Directors, New Bedford Orphan's Home, Annual Report, 1843.

<sup>3</sup> Board of Directors, New Bedford Orphan's Home, Annual Report, 1845.

application was made to the legislature at its past session and an act was passed granting that power". As the work increased, it was found necessary to have a larger institution, and, in October, 1898, the headquarters of the home were moved.

The Board of Directors of the Orphan's Home were progressive women, and, in 1909, some of them realized that the placement of children in carefully selected and supervised private homes was a more desirable way of caring for them, than in an institution. After careful consideration of the subject, it was voted to change the policy from that of an orphan's home to that of a placing agency. There were thirty children in care at this time. On May 2, 1911, the name of the corporation was changed to the "New Bedford Children's Aid Society", with the continuing purpose of "relieving, educating, and improving the condition of destitute children". On December 15, 1926, the purposes of the corporation were amended to include "care for pregnant unmarried girls and unmarried mothers and their children of any age, creed, religion or nationality, to supervise children in foster family homes, and in the homes of friends and relatives".4

During the depression period, it was frequently necessary, because of the lack of funds, to refuse care for child-

<sup>4</sup> Celeste P. Thornton, Annual Report, 1927.

ren. It was felt that providing milk for children would enable the Children's Aid Society to be of the greatest service to children, so this program was continued throughout the depression years. Children known to the Family Welfare Society, as well as those known to the Children's Aid Society, benefited from this program. Because the lack of funds from yearly incomes would not permit even this expenditure, the money was taken from unrestricted legacies to meet this need. Reflecting, it would seem, the feeling of the inadequacy of the program for care of children during this period, the Annual Report for 1932 states "there was a special effort this year to combat a selfish and demanding attitude on the part of the children in care". The report states further

The children who come to us very young we can train in the way of care of their possessions, economy, and unselfishness, and probably make an impression, but with the older children, it is far harder. Brought up to take care of nothing, to consider only themselves, they are a problem indeed.

Throughout its history the New Bedford Children's Aid Society had been careful in providing for the health needs of the children in care. In keeping with this policy, during the latter part of the depression, vegetables and fruits were provided for a small number of adolescents, who were felt to be particularly susceptible to tuberculosis.

With the increased employment of women during the war

<sup>5</sup> Celeste P. Thornton, Annual Report, 1932.

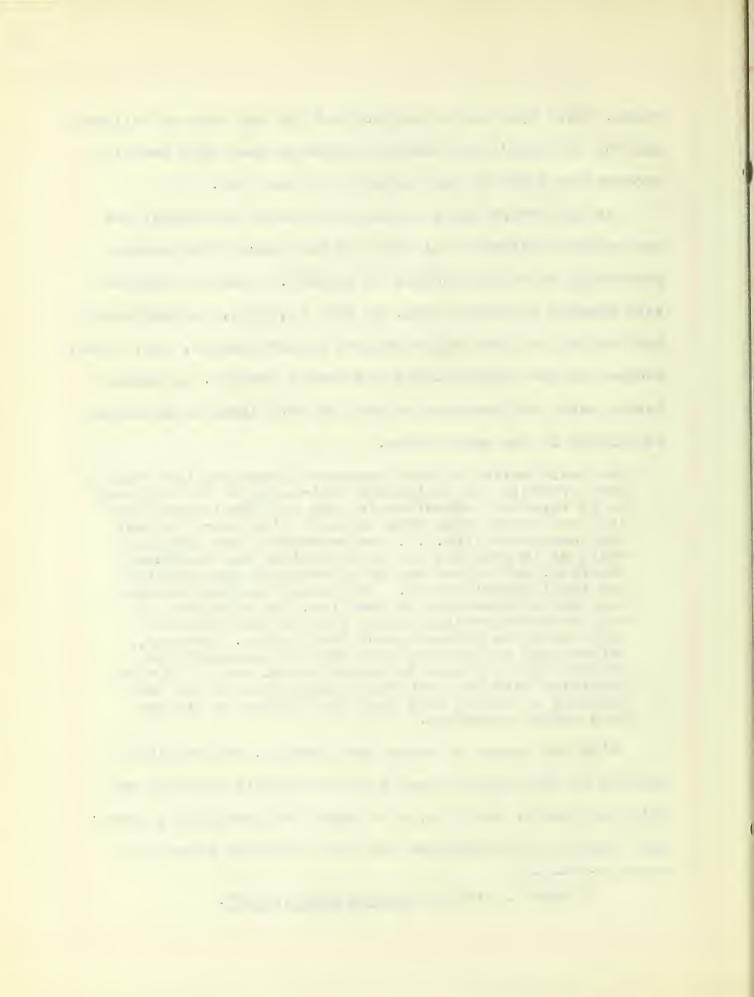
years, there was also a greater need for day care of children, and the Children's Aid Society helped to meet this need in cooperation with the day nurseries of the city.

As the theory and practice of casework developed, the New Bedford Children's Aid Society kept pace with the new philosophy of helping people in trouble. Another decisive step forward was taken when, on July 16, 1945, the Children's Aid Society and the Family Welfare Society merged, and, later, became the New Bedford Child and Family Service. A common intake makes the services offered by both agencies available to clients in the same office.

The basic belief of both agencies always has been that a home protects the health and well-being of its children as it lays the foundation for the children's emotional life and equips them with strength with which to meet the demands of life. . . The home meets the needs of a child as it provides him with physical and emotional security, and offers him an opportunity for spiritual and intellectual growth. The Family Society, through its work with members of families, has directed its help to strengthening family life so that children might have the protection of their homes. However, crises come to families that make it necessary for children to be placed in foster homes, and it is with providing care in a substitute home that offers the security of family life that the Children's Aid has been mainly concerned.6

With the merger of these two agencies, and the integration of their traditional services--family casework and child placement, adoption, as a means for providing a permanent family life experience for those children whose own

<sup>6</sup> Edna M. Carlson, Annual Report, 1946.



parents were unable to care for them, emerged as an important casework service. Early in 1946, a pediatrician, a consultant psychologist, and a psychiatrist, available for monthly consultations, were included in the staff. With expert knowledge in their individual fields, the psychologist and the pediatrician helped "to make early adoption placements of children possible, so that the infant can at an early age get that sense of security and belonging that is so essential in a person's future happiness and adjustment to life."

# Function and Process in Adoptive Placements at the New Bedford Child and Family Service

In keeping with the modern case work philosophy of the right of every individual to make decisions and to solve problems in her own way, case work with the client who is considering adoption for her child follows this pattern. Its goal is to help the parent of the child to arrive at a decision which is, for her, the most satisfying one possible. Consequently, before the agency considers a child for an adoptive placement, the mother, and, whenever possible, the father, is helped to consider all possible solutions to the problem. During this period, the child is placed in a boarding home where loving and devoted boarding parents observe

<sup>7</sup> Edna M. Carlson, Annual Report, 1947. Also conversation with Executive Secretary.

and contribute to his development. He is given monthly medical examinations by the agency pediatrician, and, when necessary, more frequent or more specialized treatment.

When the parent's decision to place a child for adoption is as free from uncertainty as is possible, a psychological examination of the child is arranged. This may also be done to help the worker in her casework service to the parent in the event there is some question about the adoptability of the child. In preparation for the psychologist, the caseworker summarizes the child's family background and personal history. In conjunction with observation of the child, and an interview with the boarding parents for developmental material, the psychologist examines the child. The rate and adequacy of his development is determined according to the Gesell rating scale.

Following the psychological examinations of the children being considered for adoption, there is a casework staff consultation with the psychologist, and, when possible, with the pediatrician. At this meeting, the child's caseworker presents the family background and personal history of the child. The psychologist reports her findings, making recommendations, when adoption is indicated, as to the general type of home in which the child would be most likely to adjust. Definite personality characteristics or clues, as well as potential intelligence, are discussed for use as guides in

the selection of adoptive parents. However, when there are doubts concerning the adequacy of the child's mental or physical development, further study in the boarding home may be recommended, before an adoptive placement is cosidered.

If it is felt that the child is adoptable, a release from the parent(s) is accepted. This gives the agency the right to place the child in a suitable home. Upon signing this release, the parent(s)' financial responsibility ceases, but legal responsibility, in the event of unexpected circumstances, continues until the time the adoption becomes final.

After the consultation with the psychologist, the casework staff meets to discuss the recommendations made for specific children, in terms of possible adoptive homes. A careful study of prospective adoptive homes has been made through numerous interviews with adoptive couples, individually and together, as well as with their references. Through this study, an effort is made to arrive at as clear an understanding, as is possible, of the advantages and limitations of the home. The most important requisite is that the home be one in which the child may find security which comes from love, understanding, and a reasonable family income. Matching the child and the adoptive parents calls for consideration of religion, personality characteristics, general intelligence level, and, as often as possible, coloring and other physical characteristics.

### Purpose of Thesis

It is the purpose of this thesis to evaluate the emotional adjustment of children placed for adoption by the New Bedford Child and Family Service in the eighteen months, from June, 1946 to November, 1947. It is the writer's intention to determine some of the factors which contributed to the successful adjustment. The writer poses the question as to what value, if any, is gained, so far as the child's emotional adjustment is concerned, from permanent placement in an adoptive home in the first few months of life? At what age is the child best able to find immediate security in a permanent home? What is the relationship between early placement and a successful adoptive adjustment? What is the relationship between late placement and a successful adoptive adjustment? Does the number of replacements experienced by the child, prior to the adoptive placement, have bearing upon the ease or difficulty of his adjustment? Does the length of time the child spent in the boarding home just prior to the adoptive placement influence his adjustment in the adoptive home?

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### Scope and Method of the Study

For this study, eighteen cases of children placed for adoption by the New Bedford Child and Family Service, from June, 1946 to November, 1947, were used. This particular period was selected because it followed the period of reorganization after the merger of the Children's Aid Society and the Family Welfare Society. Also, at its earliest date, it represents the first application of the growing agency philosophy of the importance, so far as the child's total adjustment is concerned, of early adoptive placements. The placement made in November, 1947 was felt to be the last one which could be observed over a sufficiently long period to permit a valid evaluation of the child's adjustment. Consequently, placements made after November, 1947 have not been considered.

In studying these cases, it was found that, of the eighteen cases, eight were of children placed at six months of age or earlier, and ten, placed between one and four years of age. Therefore, it is the writer's plan to make a comparative evaluation of the emotional adjustment of the two groups of children placed in adoptive homes. Inasmuch as the New Bedford Child and Family Service requires a year's supervision after placement, and before the adoption may become legal, this year period has been used, whenever possible, as the period of observation of the child's adjustment.

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In this study, consideration has been given to factors in the child's family background and personal history which contribute to a better understanding of the child. The adoptive home records have been studied, also, for the purpose of gaining some understanding of the advantages, as well as the limitations, of the homes in which the children have been placed. The third consideration, and the most important from the point of view of this thesis, is the evaluation of the actual evidence of adjustment in the adoptive homes, as found in the case records.

of the eighteen cases studied, six have been selected as representative of the total number. These six will be presented in detail, and supplemented by some discussion of the various factors peculiar to the other twelve cases. The cases have been classified according to the age of the child at the time of placement, and, within this classification, according to the degree of adjustment following placement.

The writer wishes to define certain terms which are used in this study. The term "boarding home" is used to describe the private home providing room and board for the child, in return for financial remuneration. A distinction is made between an "agency" boarding home, that is, one studied, approved, and supervised by the agency, and a "private" boarding home, that is, not under agency supervision. An "adoptive home" implies a home approved by the agency for

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the free care of a child, with supervision continuing for a year after placement, when the adoption may become legal. In this study, "replacement" means the removal of the child from one boarding home (either private or agency) to another, to, or from, the hospital, or to, or from, the child's own home, that is, with his parent(s).

The writer has used three classifications in evaluating adjustment in the adoptive home. These are based on the caseworker's observations, or on her recording of the attitudes of the adoptive parents concerning the child's adjustment. These classifications are as follows:

- 1. No symptoms of insecurity or anxiety prior to the adoptive placement, and none appearing following it.
- 2. Symptoms of insecurity or anxiety prior to the adoptive placement, disappeared completely after placement.
- 3. Symptoms of insecurity or anxiety prior to the adoptive placement, continued, but decreased, after placement.

The criteria of evaluation listed above are based on the rather commonly accepted symptoms of insecurity and anxiety.

According to Miss Rathbun<sup>8</sup>,

Since the tiny baby's needs are primarily physiological, centering in the respiratory, digestive, eliminative, and motor systems, any disturbance in his emotional life will be reflected by dysfunction in one or another of

<sup>8</sup> Constance Rathbun, "Psycho-physical Reactions to Placement," <u>Journal of Social Casework</u>, 28:62-63, February, 1947.

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these areas. . . . between six months and two years,
. . . the child has under his control an increasing
variety of physiological and psychological mechanisms
with which to express his anxiety and displeasure. . .
He may react . . . by excessive thumb sucking, increased
autoerotic activities, refusal to continue weaning, or
even to drink liquids; he may retain his faeces or
reserve them for any place except the toilet; he may
register misery and anger by prolonged spells of crying
or crib rocking or head banging; or he may exhibit
marked apprehensiveness in the presence of strangers.

### Limitations of the Study

It must be recognized that a study of eighteen cases does not permit valid quantitative conclusions, but can only indicate evidence pertaining to this limited number of cases. It would seem, however, that it might provoke further thought and study concerning the value of early placements.

The fact that the period of observation is, at most, one year is a definite limitation inasmuch as the future development and adjustment of the child cannot be measured.

This study is limited in that an evaluation of the boarding homes is not attempted, nor is more than a superficial analysis made of the adoptive homes.

Also, this study is focused on the child, and does not consider the mothers' needs or wishes, as they may bear upon the decision to place for adoption, either early or late in the child's life.

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#### CHAPTER II

#### ADOPTION THEORIES

Interest in adopting children has increased tremendously in the past few years. Child placing agencies have found themselves swamped with applications from people who wish to adopt children, doctors report that their patients are coming to them in ever increasing numbers asking for help in finding adoptable babies; and popular magazines, as well as local newspapers, have expressed concern about this very important problem. Nonprofessional agencies and "independents" have undertaken adoption work on a widespread scale. The popular approval of their work indicates an increasing demand for more, and easier, adoptions. Children are being placed privately everywhere. It is felt that the speed and secrecy of this type of placement are its most appealing factors. While the general public has been emphatic in expressing its desire for early adoption of small babies, there is still much controversy among adoption agencies as to the proper age at which children should be placed. Some workers feel that a long period of observation of the child is necessary to assure a good placement, while others believe that the earlier the child is placed in a permanent home, the better for all concerned. 9

Children, pp. 6-16

9 Jessie Taft, editor, Social Case Work With

In spite of the obvious importance of the subject of adoption, relatively little has been written to substantiate either theory. Dr. Florence Clothier, Psychiatrist, New England Home for Little Wanderers, Boston, has been the most outspoken proponent of early adoptions. She supports the belief that the mother should be encouraged to make an early decision, even before the birth of the baby, and suggests, as an ideal, that the baby be placed in an adoptive home upon discharge from the hospital after birth. It is her belief that in an early adoptive placement, the child has the opportunity to more nearly approximate the emotional and social development of the "own" child. This contention is based on the theory that the experiences and relationships which the individual has in the very early period of life become a part of the personality, and are only modified by later experiences. She believes "the earlier in life a child becomes a part of a family, the more deeply can that family become a part of the child".10

Dr. Clothier states further

Although the adopted infant cannot experience fully with the substitute mother, the satisfactions of the nursing period, he will experience with her his first and extremely important socializing relationship. The process of receiving food or sucking is for the infant at first an intensely personal experience, but

<sup>10</sup> Florence Clothier, M.D., "The Psychology of the Adopted Child," Mental Hygiene, 27:222-224, April, 1943

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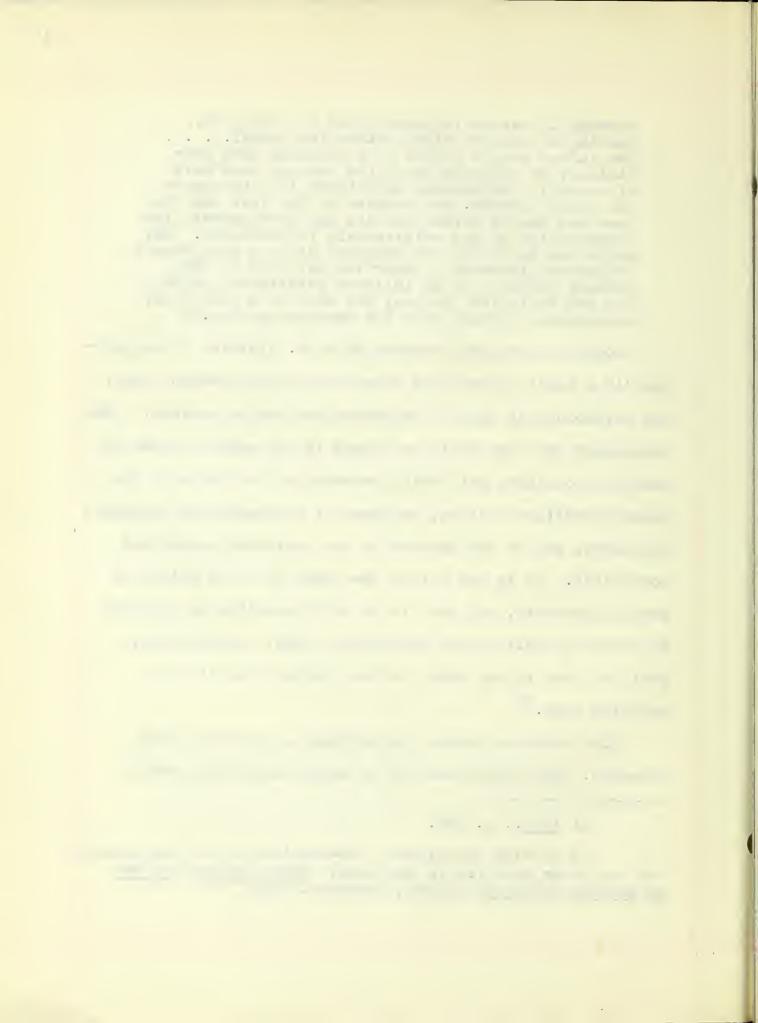
through it the child establishes his earliest, meaningful rapport with another individual. . . . The infant who is placed in a boarding home preliminary to adoption does live through some sort of socially influencing experience in relation to the foster mother, but because of the fact that the home has deeply influenced his ego development, the interruption of his relationship is traumatic. Any child who is placed for adoption after a preliminary temporary placement is deprived not only of the primary security of an intimate relationship with his own biological mother, but also of a completely experienced infancy with the adoptive mother.ll

Dorothy Hutchinson concurs with Dr. Clothier in suggesting "if a baby's first love objects are his permanent ones, the psychological gain is uninterrupted and unimpaired." She recommends that the child be placed in the adoptive home as early as possible, yet "still selected on the basis of the known hereditary factors, evidence of an uneventful pregnancy and birth, and on the grounds of his beginning health and normality". It is her belief that much is to be gained by early placements, and that it is still possible to continue to study the child after placement. This, she believes, could be done in the adoptive home rather than in the boarding home. 12

Miss Browning agrees, in substance, with the above theories. With experience in an agency practicing early

<sup>11 &</sup>lt;u>Ibid.</u>, p. 226.

<sup>12</sup> Dorothy Hutchinson, "Re-examination of Some Aspects of Case Work Practice in Adoption," Child Welfare League of America Bulletin, 25:5-6, November, 1946



placements, she states

home or hospital are made because we believe in the importance of the mother-infant relationship. We believe that when normal and natural ties are broken, there should be provided, as quickly as possible, an adequate substitute for the interrupted post-natal relationship with the natural mother. . . substituting a new and permanent mother for the natural mother. . . The earlier the permanent substitute child-mother relationship can be established, the better the chances for an emotionally healthy adopted child. 13

Dr. Ribble contends that personal and tender care during the baby's first year is as important a need as food, sleep, or any other necessities. This should be given, she feels, by one person to whom the child can attach himself, as the young baby is entirely dependent upon other people for his emotional stimulation. It is her belief that separation from the familiar person is just as serious to a small baby as is physical injury. Because the newborn child is incomplete, nervously and mentally, the emotional tie between the mother and the child is equally as important as was the physical tie which existed before birth. It is her feeling that

. . . emotional relationships should not be disturbed during the first months of life. . . The capacity of human beings to form sound relationships with other individuals is begun in the first weeks of life. . .

<sup>13</sup> Lucie Browning, "The Placement of the Child Needing Adoption," Child Welfare League of America Bulletin, 23:6, September, 1944.

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A continuous environment of emotional warmth is necessary for the primary organization of the child's personality. 14

Dr. Ribble goes on to say that because of the difficulties involved in finding effective means of allaying anxiety in the infant and very young child, when separated from its mother, it is very important that the relationship between the mother, or the mother person, and the baby be kept unbroken and warm. 15

Miss Rathbun, in talking about timing in adoptive placements, has said "Separation from the mother is much more traumatic in its effects after the first six months of the baby's life, because it is then that personal relationships, especially to the mother, become established." She believes that when a child is unable to feel secure in the dependence upon one person, the child's psycho-physical development is negatively affected. Miss Rathbun states

It would seem that in this period before six months of predominantly somatic over psychic development, the baby can most easily accept a mother substitute, an observation of utmost importance for the timing of adoptive placements. . . With each subsequent replacement, the child's capacity to form the strong affectional relationships recognized to be the sine qua non of a normal healthy personality is weakened. 16

<sup>14</sup> Margaret Ribble, M.D., "Infant Care and Emotional Growth," Child Welfare League of America Bulletin, 23:1, October, 1944.

<sup>15 &</sup>lt;u>Ibid.</u>, p. 2

<sup>16</sup> Constance Rathbun, op. cit., p. 62.

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Dr. Clothier grants "the adoption of the newborn infant is a ticklish business", but feels "when skillfully and thoughtfully carried out, it probably offers a better prognosis than does the adoption of the older child". She feels that when there are factors in the child's background which make adoption questionable, there is nothing to be gained from waiting until the child is two or more years old, before a decision is made to place him in a permanent home. In evaluation of the child for adoption, Dr. Clothier believes that the social worker is faced with two distinctly different problems:

- 1) . . . the evaluation of the socially inaccessible newborn infant, not yet influenced by experience or emotional relationships.
- 2) . . . the evaluation of the older child, whose performance can be observed, and who can give some account of himself, but whose personality is complicated by the inclusion in it of elements of the personalities with whom he has grown up, as well as the reactions to the experiences through which he has lived. 17

Dr. Clothier states further that through "psychological tests and observations, general ideas can often be obtained of an infant's potential abilities". The realization of these potentialities, she feels, will depend, to a large extent, "upon the experiences the child lives through, and

<sup>17</sup> Florence Clothier, M.D., "Placing the Child for Adoption," Mental Hygiene, 26:258-260, April, 1942.

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the love relationships he forms with other people". 18

Although he agrees with the workers who believe that the older the child at the time of adoption, the surer one can be of his exact mental and physical status, Dr. Knight feels

. . . these later adoptions sacrifice other values and involve a different set of risks. . . The child brings comparisons between earlier "parents" and the new ones, he may be traumatized by his experience prior to adoption. . . he may feel rejected and insecure. These risks are not present if the child is adopted at a few weeks or a few months. 19

On the other hand, Miss Taft feels that change and separation are inherent in living, and states

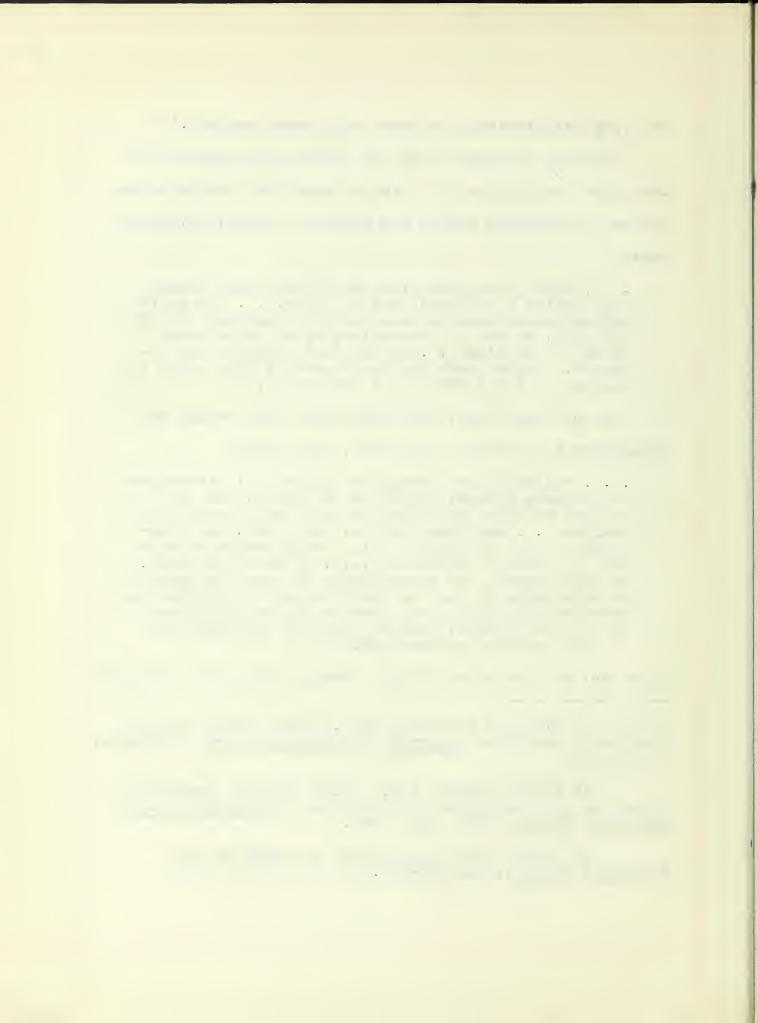
. . . children have tremendous capacity in themselves to overcome trauma, to adjust to change, and to utilize whatever they find in their environment for healing. . . what man resists, above all, is interference with any phase of his living before he himself is ready to abandon it. . . If he can possess, to some degree, the ending phase of even the deepest relationship, so that he feels as part of himself the movement toward the new, then he can not only bear the growth process, however painful, but can accept it with positive affirmation. 20

In a further discussion of this theory, Miss Taft continues

<sup>18</sup> Florence Clothier, M.D., "Some Aspects of the Problem of Adoption," <u>Journal of Orthopsychiatry</u>, 9:605-606, July, 1939.

<sup>19</sup> Robert Knight, M.D., "Some Problems Involved in Selecting and Rearing Adopted Children," <u>Bulletin of the Menninger Clinic</u>, 5:69, May, 1941.

<sup>20</sup> Jessie Taft, The Role of the Baby in the Placement Process, pp. 106-109.



If I were adopting a child, I should infinitely prefer one who had experienced for a time, at least, the healing organic connection with life outside the uterus, through the breast of his own mother, to the baby who, following the trauma of birth, has had to bridge a chasm of disconnectedness without the immediate restoration of unity which only the mother can supply. 21

Miss Taft believes that the child can use the temporary foster home to meet his own needs, and "with the support of the worker, he can leave it in order to take on a home toward which he himself is moving with some sense of his own will and choice". She feels that the baby who leaves his mother, and goes to a good foster home before the adoptive placement, has experienced, with the help of the worker, an opportunity for growth which is "therapeutic". 22

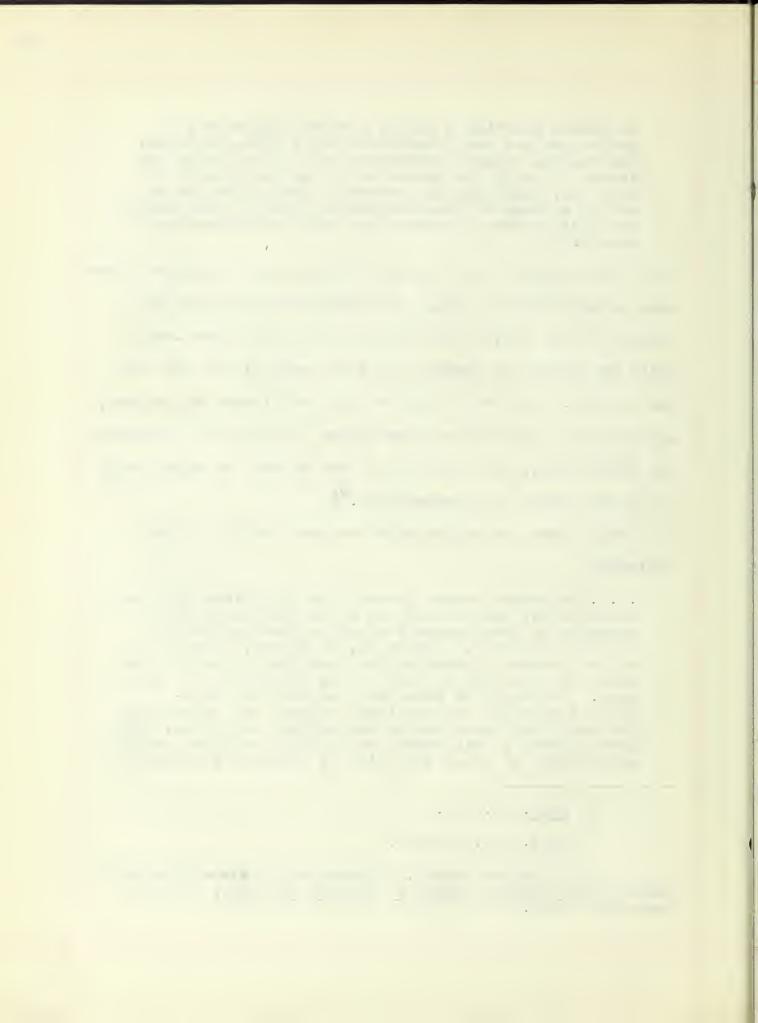
Miss Bishop expresses much the same feeling in her statement

. . . we cannot always protect the child from difficult experiences, but we need not be so fearful of his capacity to incorporate it, and to grow emotionally in its presence. . There is, of course, no question of the greater discrimination possible in placing the child for adoption at four to six months than at ten days. The child is known as a person with well-defined physical and emotional make-up and capacities. One could say these are better defined at a year, even more clearly at six years, so that the point we settle on at which to place the child is somewhat arbitrary. 23

<sup>21</sup> Ibid., p. 105.

<sup>22</sup> Ibid., pp. 109-110.

<sup>23</sup> Julia Ann Bishop, "Discussion of Miss Browning's Paper," Child Welfare League of America Bulletin, 23:7;19, September, 1944.



#### CHAPTER IV

### PRESENTATION OF CASE MATERIAL

As stated earlier in this study, 4 of the eighteen cases coming within the scope of this thesis, six have been selected as representative of the other twelve. These six will be presented in detail. Specific differences and similarities in the other cases will be noted in the interpretations which follow the case material. The cases will be presented in groups according to age at time of placement in the adoptive home, and also according to the degree of adjustment in the adoptive placement within each age group.

## CHILDREN PLACED AT SIX MONTHS OR YOUNGER

No symptoms of insecurity or anxiety prior to the adoptive placement and none appearing following it

#### DONALD

# Family Background

Donald's mother was a twenty-one year old girl of Portugese descent who was illegitimately pregnant at the time of her application to the agency. She was described as a rather large, ungainly girl of dark coloring. She was considered by the caseworker to be of average intelligence and self-directing. Her manner, for the most part, was gay and colorful, and characterized by a strong sense of humor. It was felt that she was immature emotionally and relatively unsophisticated. She was of limited education, having left school in the ninth grade at fifteen years of age. After leaving school, she did rather con-

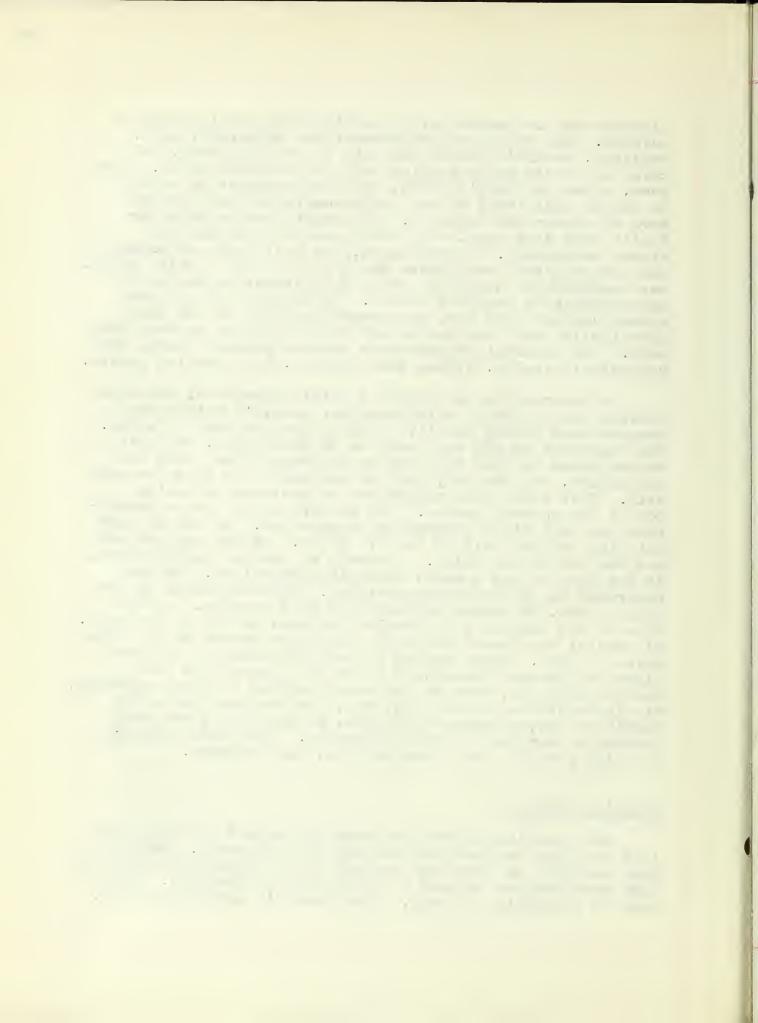
<sup>24</sup> Refer to pages 18-19

sistent work in hospitals, in keeping with her interest in science. Her vocational adjustment was apparently good. Socially, Donald's mother was said to be "isolated", her chief interests being reading and an occasional movie. However, after the baby's birth, she gave evidence of ability to relate positively to her fellow-employees both in the work situation and socially. Her relationships with her family were very poor, with both parents rejecting her almost completely. Nevertheless, the fact that her mother, who deserted the family when the girl was just a small child, was unwilling to stand by her in this situation was quite unacceptable to Donald's mother. Throughout most of the agency contact with her, she seemed to cling to the very unrealistic hope that her mother would help her to keep the The maternal grandparents were of peasant stock, and, characteristically, strong and vigorous, hard working people.

In contrast to the almost complete absence of positive feeling in her family relationships, Donald's mother expressed very strong positive feeling for the baby's father. When marriage to him was found to be impossible, Donald's mother hoped to keep the baby as evidence of her love for his father, and the only part of him she could have for herself. This vague hope caused her to postpone releasing Donald for several months. The alleged father was a twentyfour year old first generation Yugoslavian. He was of dark coloring and was said to be well built. He was married and had one legitimate child. Although of average intelligence, it was felt he had a weak, unstable personality. He was described as gay and happy-go-lucky. Leaving school in the ninth grade, he worked periodically as a laborer. At the time of his contact with Donald's mother, he was in the Army. His social adjustment had been poor as evidenced by his long prison record. This started in early adolescence and continued at frequent intervals up to the time of the last contact with him, when he was again serving a prison sentence. His instability, it was felt, was, for the most part, the result of inconsistent discipline, as his family was very favorably regarded in their community. They were described as "fine people", and conscientious, hard workers.

### Adoptive Parents

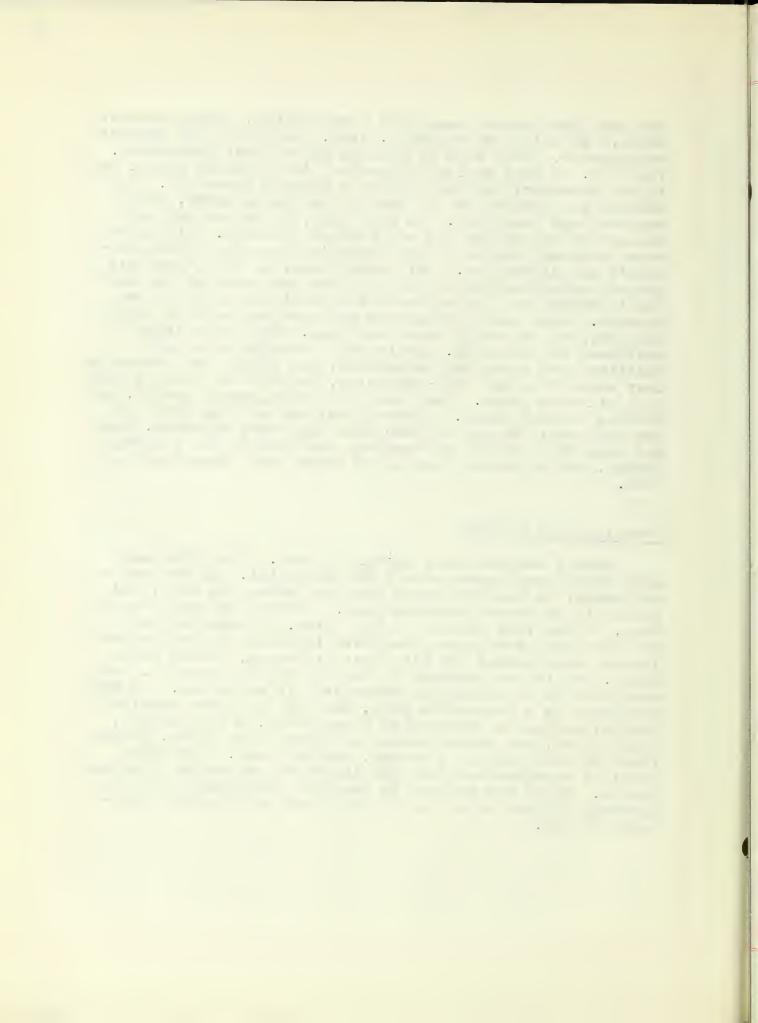
The adoptive parents selected for Donald were in their late twenties and had been married for six years. Unable to have children of their own because of the husband's sterility, they were anxious to have a family through adoption. They were of Lithuanian descent. Like Donald's natural parents,



the adoptive parents came from hard working, strong peasant stock. In build and coloring, also, they were like Donald's They were of limited educational background. own parents. The wife, an only child, left school in the tenth grade, when it was necessary for her to have a thyroid operation. The husband left school at the end of the eighth grade, when he was fourteen years old. At that time, he became the sole support of his mother and six younger siblings. His parents were divorced because of his father's financial irresponsibility and alcoholism. This experience, he felt, gave him greater understanding of the problems and needs of the child who is unable to find security and happiness with his own parents. Both adoptive parents had been employed as factory workers, but following their marriage, only the husband continued at this work. Their relationships with both families were close and harmonious, and within the community they were liked and well-respected, in spite of being a part of a minority group. They were very warm, happy people, and devoted to each other. Although neither of them could see how they could be any happier than they were together, they did hope for a child to "complete the picture" of a normal family, and with whom they could share their happiness and love.

## Pre-placement History

Donald was born in a maternity home. His birth and post-natal development were both uneventful. At the age of six weeks, he was discharged from the maternity home, and placed in an agency boarding home. Although a good natured baby, he was very passive at that time. It was felt that his emotional development had been impaired by institutional life he experienced for his first six weeks. Seven weeks later, Donald was examined by the agency psychologist, and was found to be developing adequately in all areas. He was described as a responsive baby, who was very much aware of people, and had a "wonderful" disposition. A very strong, active baby, who showed temper at appropriate times, he was found to be a perfectly normal, healthy baby. Periodic physical examinations had also indicated he was in excellent health. There was nothing in Donald's background or in his personal history which contra-indicated an adoptive placement for him.

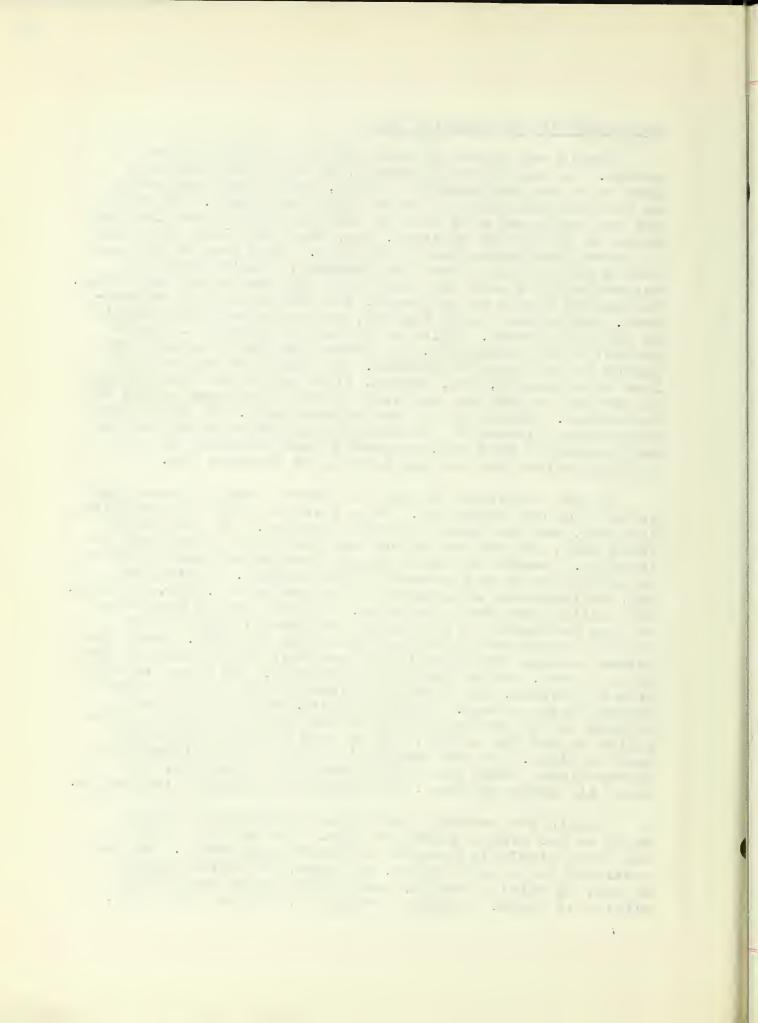


## Adjustment in the Adoptive Home

Donald was placed in this home at the age of five months. On the day of placement, he burst into smile as soon as he saw the adoptive mother, and showed absolutely no hesitancy in going to either adoptive parent. He seemed gay and contented with both of them throughout the time they spent in the office together, and, when they left with him, he seemed very comfortable and happy. When seen at his new home a short while after his placement, Donald obviously was entirely at ease and happy with his new mother and father. He laughed easily as he played, and indicated real contentment. He enjoyed being fondled, and would smile and cuddle up to both parents. While he did enjoy attention, Donald did not really demand it, but seemed perfectly content and serene as he played by himself. He showed no evidence of fear of strangers, but, rather, after the first few moments of getting acquainted, was very friendly and came easily to the worker. Donald was a very relaxed baby. Within a few weeks after placement, the adoptive mother reported that he had learned to kiss her, and would show affection on his own initiative when she was bathing or dressing him.

He has continued to have the serene, happy disposition he had from the beginning. He ate well, apparently enjoying his food, and was never a feeding problem. He has always slept well, and has not in any way indicated anxiety or insecurity. Donald has shown discrimination and some evidence of aggression in his personal relationships. During the day, he indicates attachment to his new mother, and, at times, will follow her about the house. However, he is also able to play by himself with apparent enjoyment, and without obvious concern about having his mother in sight. When the father returns from work in the evening, Donald becomes very much excited, and is obviously delighted. He plays happily with his father, and almost completely ignores his mother during these periods. Donald decided, shortly after he arrived in his new home, that it was his father's responsibility to put him to bed, and to stay with him until he went to sleep. No one except his father could please him at bed-time. Until his father gave him the bottle, he would lie awake and fuss, and indicating general displeasure.

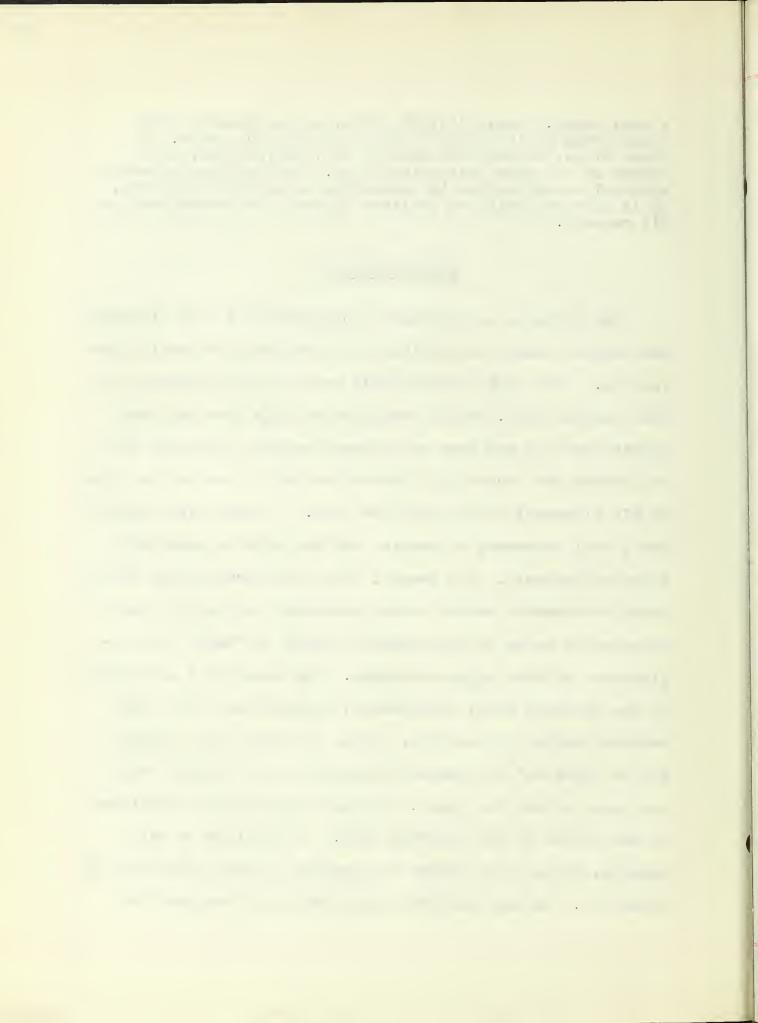
Donald has recently become more conscious of music, which he has always seemed to like. Now he will "dance" and laugh gleefully whenever he hears peppy music. He has continued to be very active, and, now, at fifteen months of age, is walking easily, and investigating everything within his reach. Although Donald is, for the most part,



a very happy, almost "jolly" child, he can readily show temper when he is unable to have something he wants. At these times, he does not usually cry, but, rather, will bounce up and down indicating anger. Although Donald shows appropriate aggression in attempting to get what he wants, he is also beginning to indicate interest in the approval of his parents.

#### INTERPRETATION

The evidence in the record indicates that this placement has enabled Donald to continue his development without interruption. Under the comparatively personalized influence of the boarding home, Donald developed rapidly from the very passive baby he was when he arrived from the maternity home and became the exceedingly responsive baby he was at the time of his placement in the adoptive home. It would seem that he had a real awareness of people, and was able to make satisfying attachments. His removal from the boarding home before these attachments became a more permanent part of his total personality seems to have enabled Donald to "take" this replacement without apparent damage. The consistent experience of one boarding home, undoubtedly, contributed to his very evident feeling of security. This, it would seem, enabled him to "take on" the adoptive parents in his stride, and to continue to have the happy, smiling disposition he developed in the warmth of the boarding home. In addition to this, however, he has gone beyond that period of mere acceptance of affection. In the adoptive home, Donald has been able to

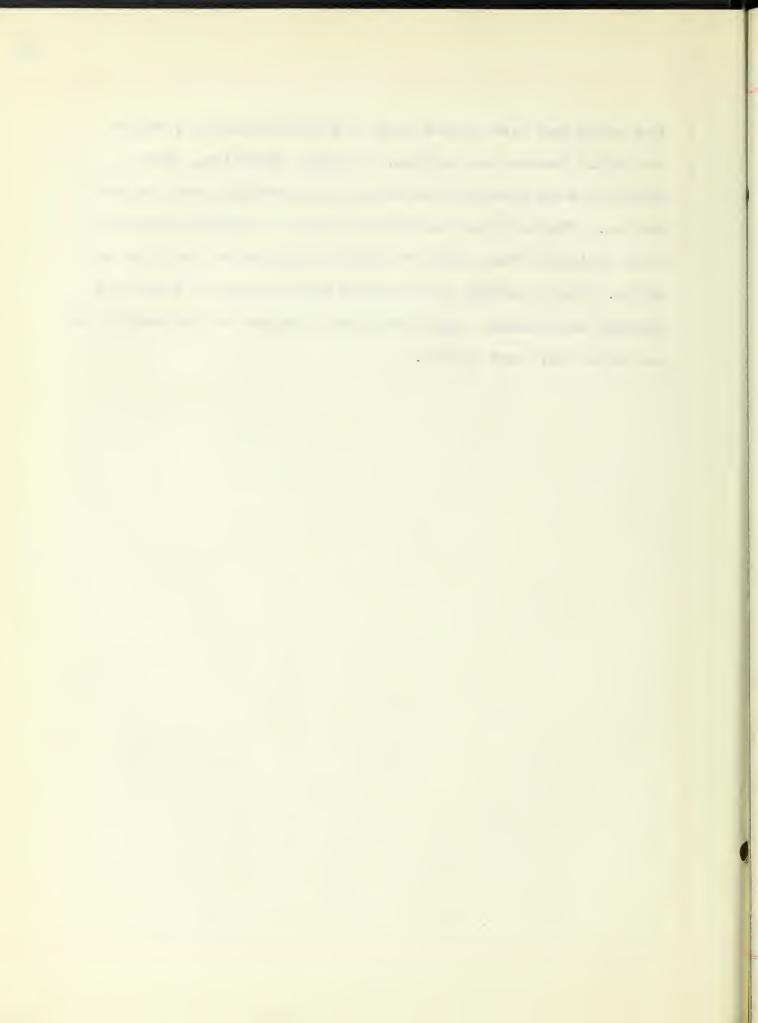


express, on his own initiative, his affection for his new parents. It has been possible for him, also, to show some aggression and to be demanding within normal limits. That he is completely at ease with strangers, after the normal shyness of the first few minutes, would indicate that Donald is, without question, completely comfortable and secure in his new home. That security has enabled him to develop without fear of people. The opportunity which Donald had to make strong, permanent attachments fairly early in his life, and, consequently, to continue to feel secure, has enabled him to remain a serene and happy baby. His total adjustment would seem to be definitely related to his early placement in a permanent home with loving and devoted parents.

There were five other children in this younger age group whose adjustment in the adoptive home was a-symptomatic. The development of these other children also continued without interruption. All of them were said to be happy, sunny, and secure children, who "took" the placement without evidence of any anxiety. From the beginning, they ate and slept well. They all became quickly aware of their new families, and showed affection, in varying degrees, for their new parents and siblings. All five of these children also indicated a complete lack of fear of people, and, although responsive, showed discrimination in their relationships. Two of these other children developed a normal amount of aggression.

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One child was less active than he had been earlier, while one child became more active. Without exception, these children were described as serene, comfortable, and relaxed babies. They all had experienced just one agency boarding home following the period of hospitalization at the time of birth. Their ability to adjust, without upset, to a new and strange environment seems definitely related to the early age at which they were placed.



Symptoms of insecurity and anxiety prior to the adoptive placement disappeared completely after placement

#### PETER

### Family Background

Peter's mother was a twenty-three year old, handsome and well-built, married woman of Portugese descent. She and his father had been separated several times, and were finally divorced. However, because Peter was conceived before the divorce became final, he was considered a legitimate child. His mother was employed at a mill as a stitcher for most of the time after she left school at sixteen years of age. was then in the eighth grade. Academically, she had done fair work, and, according to her school record, she had been "well-behaved". She was cooperative and responsible in arranging the details of placement, even though she indicated no ambivalence about giving her children away. Peter was her third child, and the second one placed for adoption. Little was known about her family relationships, although it was known that she had sent her oldest child, a girl, to her mother's home, and planned to go there to live. Her father had died when she was four years old. Later, her mother remarried, but this father died, too, before Peter's mother was an adolescent. It was indicated that her home was of limited standards, but there was no history of delinquency or of mental illness.

Peter's father was a twenty-five year old, rather dull individual of Portugese descent. He had absolutely no feeling about relinquishing the child; in fact, he felt that private placement was preferable, as it was less "trouble" than placement through the agency. He revealed little of himself in interviews, but it was learned that he left school at fourteen years of age, and had been employed irregularly as a taxi driver since that time. He was said to have a very poor work record, which he attributed to his bad physical condition. However, he was unwilling to discuss his health.

# Adoptive Parents

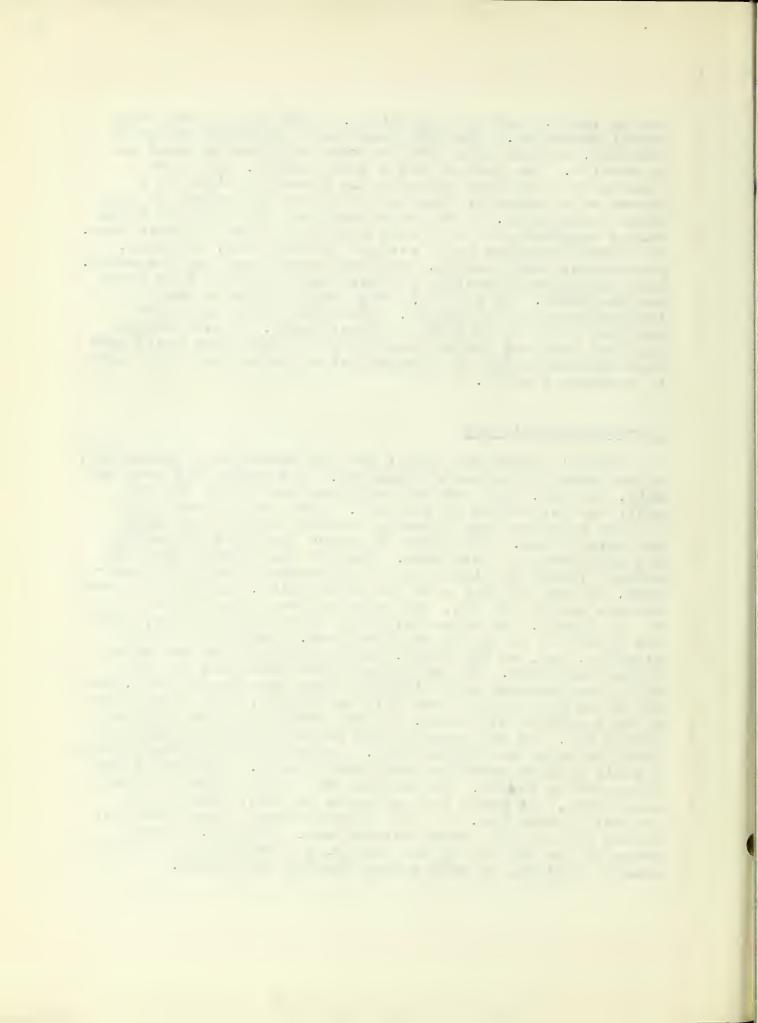
A young couple, in their early thirties, whose nationality backgrounds and appearance matched Peter's were chosen to be his new parents. They were both light complexioned, and of Irish and Portugese descent. Although married for



twelve years, they were childless. Both had had some high school education. The wife completed a business course, in addition, and had done clerical work while her husband was in service. The husband was a truck driver. He hoped eventually to go into business for himself, either as a farmer or a mechanic, inasmuch as he was interested in both these occupations. Both the husband and wife enjoyed doing things together, and were very much interested in their home. They were described as of average intelligence, and warm, easy-going, happy people, who loved each other and the world. Their relationships with relatives and neighbors were close and congenial. It was felt that they both had a keen imagination and high spirit. While not modern in their thinking about child care and development, it was thought that the warm and loving atmosphere of their home would more than compensate for the theoretical mistakes they might make in training a child.

### Pre-placement History

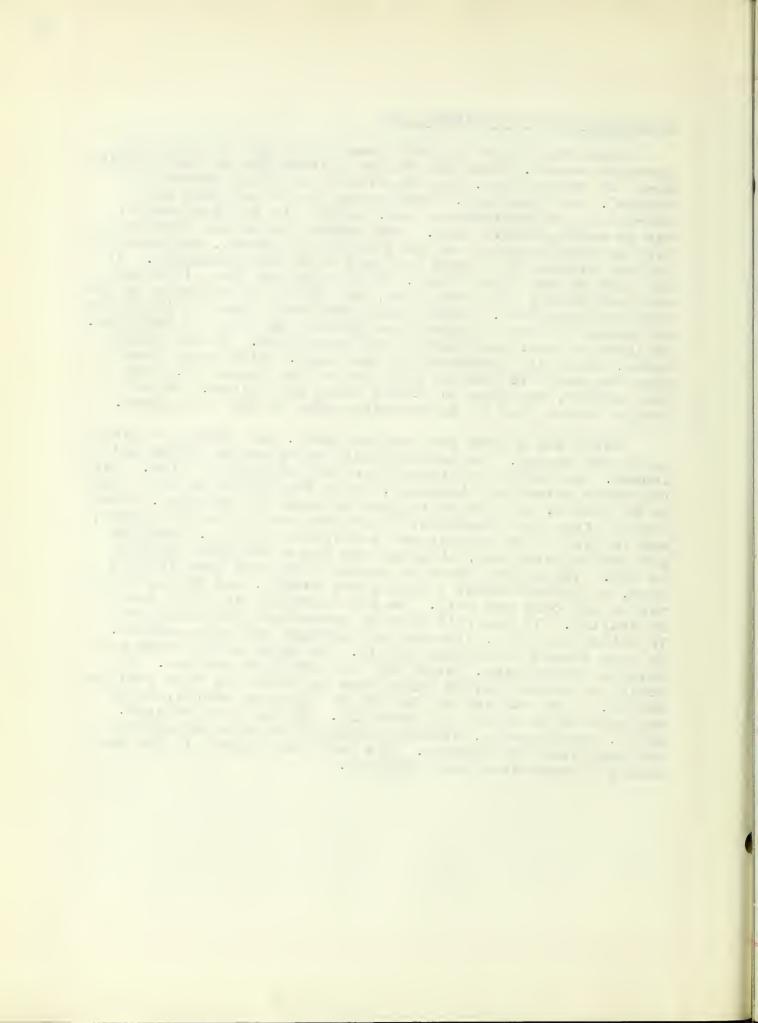
Peter's birth was normal and his development uneventful, as had been his mother's pregnancy. His mother had been so well, in fact, that she had continued working in the mill until the day before he was born. Peter was placed in a private boarding home directly from the hospital at about ten days of age. There was no record available regarding his adjustment in this home. When it was learned that the mother planned to place him in a hap-hazard adoptive placement, as she had done with her other child, one of the agency workers sought her out, and suggested that she release him to the agency. At a few days over three weeks of age, Peter was placed in an agency boarding home. There, he gained steadily, and, on the whole, was well, except for one minor intestinal upset. The boarding mother described him as a child who demanded more attention than the average baby, and who cried more than it was felt was normal, when he was not given immediate attention. He was very happy when she was around him. It was thought that he needed more loving and fondling than the average baby. During this boarding period, a scaly redness developed on Peter's knees. This was later diagnosed as eczema. He was said to be interested in people around him, but would lay and stare at them, rather than actively responding. In his personal-social relationships, he was felt to be a very passive baby. However, he was aware of the members of the family, and would cry in protest when left alone, or with anyone outside the family.



### Adjustment in the Adoptive Home

Peter was placed in this home at the age of four and one-half months. When the worker visited him in the adoptive home two weeks later, she observed a "striking personality change". At this time, Peter seemed to be bursting with energy and responsiveness, and, unlike his earlier manner, was an eager, active baby. The eczema, which had been so very noticeable prior to the adoptive placement, was reported to have cleared up a very few days after the placement. At the time of the first visit, it was noticed that his knees were completely soft and clear, and showed no evidence of the previous condition. Peter slept very well from the beginning, and seemed to have settled down without an upset of any kind. He liked to eat, and readily took new foods. In the early weeks, after his placement in this home, Peter would fuss when the adoptive parents went out of the room, but, after this period, was able to accept being left alone. He no longer showed fear or apprehension when he was left alone.

Peter was a very good natured baby, who seemed to have unlimited energy. He was obviously happy as he kicked and crowed. He talked to himself for long periods of time. two weeks after the placement, Peter was trying to roll over as he played, all the while good natured and laughing. Four months after the placement, Peter came easily to the worker, and in just a few minutes was completely at ease, laughing and playing with her, although she was a complete stranger to him. Throughout the nine months Peter has been in this home, he gained weight steadily and evenly, and during this period had only one cold. He was described as a "picture of health". It was felt that he came along unusually well in toilet training, although no pressure had been exerted. He just seemed to respond easily. In spite of his very enjoyable disposition, Peter had very definite desires. would get appropriately angry when he could not have what he wanted. When studied at the age of thirteen months, Peter was said to be developing normally. He was very relaxed, happy, and friendly, although normally shy with strangers for the first few minutes. His total adjustment in the new home was considered very adequate.



## INTERPRETATION

For the first four and a half months of his life, in which he was replaced three times, Peter indicated very definite evidence of insecurity. Even at this early age, Peter's passivity, his eczema, and his excessive crying seemed to be symptomatic of emotional disturbance. His very obvious fearfulness was indicated by his constant demand for attention, as well as by his crying when left alone. Although he experienced two replacements by the time he was three weeks old, Peter did have one consistent experience in the agency boarding home for the three months just prior to his adoptive placement.

The spontaneous emerging of a completely new personality upon the experience of a satisfying and stimulating relationship seems to be definitely related to Peter's early placement. That he was able in two weeks to develop from a very noticeably passive baby to one bursting with energy and activity is indicative of his sense of security and some realization of the love and devotion of parents who wanted him. The disappearance of the eczema a few days after the placement was a further indication of his new sense of security. This very early response was followed by further evidence, when, within a few months, Peter was able to accept separation from his new mother without being obviously disturbed.

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It would seem that Peter's placement at an early age, before he had experienced further emotional deprivation, and while he was still plastic enough to be amenable to change made this apparently easy adjustment possible. In view of his quite violent reaction to his earlier experience, it is conceivable that had the placement in the permanent home been delayed longer more irreparable damage would have been done.

Peter was the only child in the younger age group whose symptoms of insecurity disappeared completely after placement in the adoptive home.

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Symptoms of insecurity and anxiety prior to the adoptive placement continued, but decreased, after placement

#### TOMMY

## Family Background

Tommy was an illegitimate child born to a twenty-five year old married woman at the time her husband was in service over-seas. His mother was described as a pleasant young woman, who did not seem to be a very sensitive person. Her manner throughout the contact, however, was quiet and pleasant. Maternally, she came from a family of hard working, strong mill people of English descent. Her father was supposedly a member of a well-to-do farm family, and was of English descent, also. As an adolescent, he had run away from home to join the English Navy, and from that time on established a pattern for wandering. His need to be constantly on the move, plus his interest in another woman, resulted in the home breaking up when Tommy's mother was just two years old. She was placed in a foster home for seven years, and had enjoyed this experience very much. Upon her mother's remarriage, Tommy's mother was removed from the foster home, and went to live with her mother and step-father. She was most unhappy in this home. Her school record indicated average intelligence. She left school in the ninth grade at sixteen years of age, and immediately started to work in a cotton mill. She worked there for four years, and, then, at twenty years of age, was married. Her marriage to an electrician was a very happy one, and, although both she and her husband wanted children, neither felt this child could be accepted into the family.

The alleged father, a twenty-three year old Army private, was "picked up" in a lunch room, and dated Tommy's mother over a period of two months. Information about him was limited to what he told her about himself and to her feeling about him after seeing him only a few times. He spoke well and had nice manners, so she thought he was well-educated and came from a good family. He had told her that his father was a doctor. Although his father was anxious for him to take this training, Tommy's father said he was not interested in following his father's profession. Tommy's mother described the alleged father as gay and friendly, and a person who liked to dance and drink, although not to excess. She never knew his name or any definite information about him, so, although she was willing that he be contacted, this was never possible.

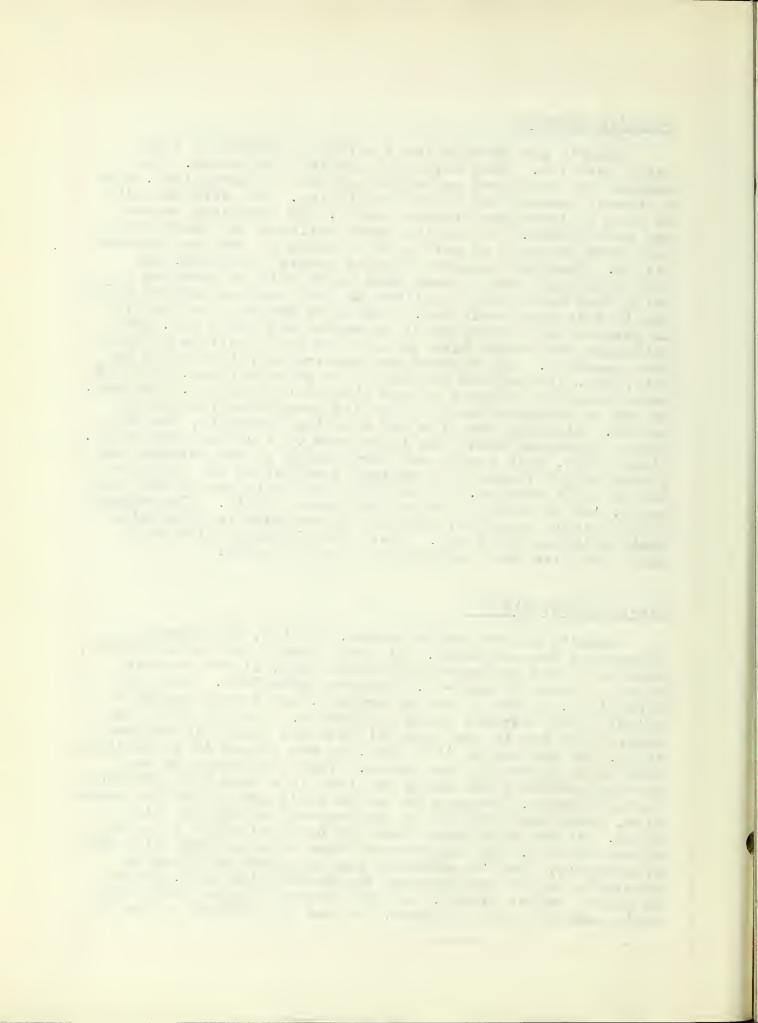


## Adoptive Parents

Tommy's new parents are a childless couple in their early thirties. They have been married five years. The husband was described as boyish and full of enthusiasm, with a friendly manner and a zest for living. The wife was said to have a direct and sincere manner, and indicated warmth and sensitivity. In talking about children and their needs, both gave evidence of having an attitude of serious responsi-They were anxious to have several children, and bility. both felt that even if they were later able to conceive a child, they would still continue to feel that an adopted child was just as much their own. They were anxious for a child to have as much education as he wanted and could use, and felt that they would like to have him go to college if this were possible. The husband was particularly interested in this, for, although he had wanted to go to college, this had been impossible because of his financial situation. Instead, he took a business course after his graduation from high Although the wife was a college graduate, she was school. not so concerned about the importance of a college education. Financially, this family was very secure as the husband had a very bright future in a medical institution for which he was business manager. It was felt that this couple was very happy, and that they were well-adjusted people. They worked cooperatively together, and were open-minded in discussing their opinions and ideas. Their relationships with both their families were very positive and friendly.

# Pre-placement History

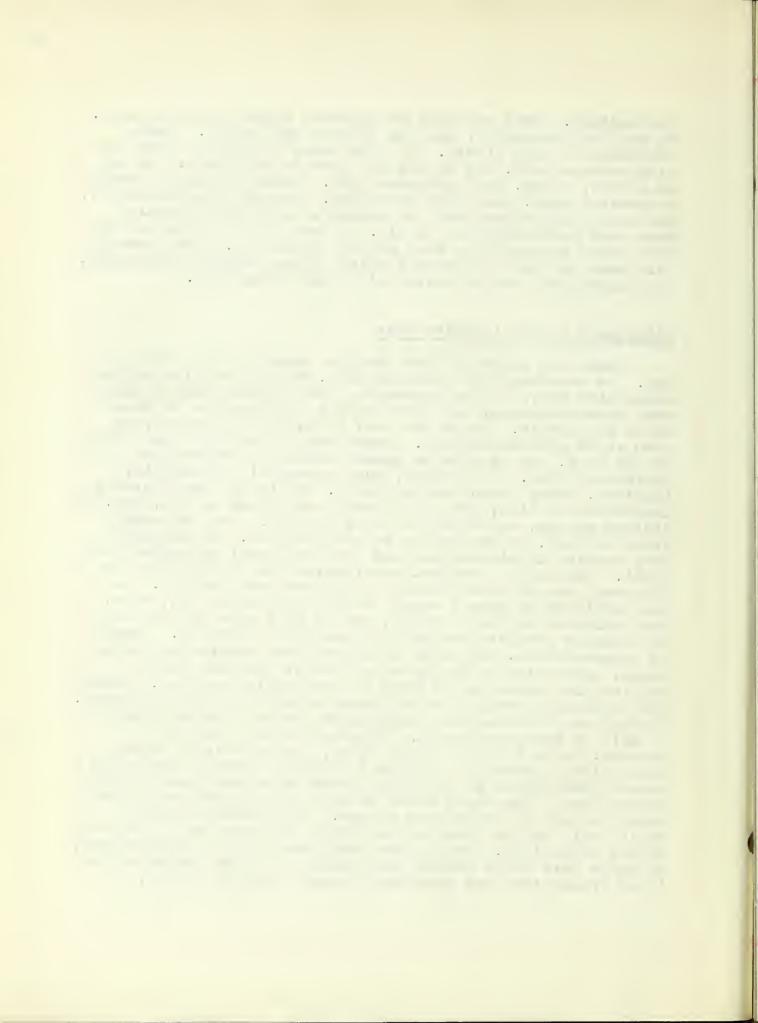
Tommy's mother was nauseated, worried, and unhappy throughout the pregnancy. Although Tommy's birth was normal, because he was an exceedingly small baby, it was thought that, at least in make-up, Tommy was premature. From the very first, he was a feeding problem, and seemed unable to adjust to any formula or to a schedule. For his first ten days, Tommy was in the hospital with his mother in another state. At the end of that time, he was placed in a boarding home by an agency in that state. Tommy continued to be a feeding problem even though he lived in a home with devoted foster parents. Because he was so small and his weight gains slow, Tommy was replaced to the hospital within the first month. He was discharged from the hospital after a period of observation. As the doctors found nothing wrong with him organically, Tommy's condition was diagnosed as "feeding problem", and he was returned to the boarding home, where he gained weight slowly. At four months of age, Tommy was again removed from that home, and was transferred to one in



New Bedford. This was also an approved agency boarding home. He was fed frequently, and ate eagerly and easily. Tommy continued to gain slowly. In this home, he shared attention with another baby, but he did not seem to mind this. He was an active, happy, and contented baby. Tommy was an extremely responsive baby, who loved attention. He would smile readily, and would gurgle and "coo" to himself, or "talk" to people when they paid attention to him. It was felt that he had an attractive personality, even at this early age. Tommy was in this home for just two months prior to his adoptive placement, and during this period sucked his thumb frequently.

## Adjustment in the Adoptive Home

Tommy was placed in the adoptive home at six months of He continued to develop slowly, but was still a happy, responsive baby. After placement, Tommy became increasingly more discriminating, and would take a little while to warm up to new people. He is now very friendly and playful, as soon as he gets acquainted. Tommy keeps very busy, is always on the move, and is able to amuse himself for reasonable periods of time. Oftentimes, when he and his father play together, Tommy laughs uproariously. While not particularly interested in milk, Tommy is a child who likes to eat, and, at sixteen months, was trying to feed himself. For two months prior to that, he had helped to hold his cup. He has been very regular in his habits, and has slept well throughout the night. The rather frequent bowel movements he had prior to placement became less frequent, but have been regular. He has continued to have a happy, even disposition, but, also, now indicates definite wishes, and is well able to show his displeasure when he does not get something he wants. Tommy is interested in, and eager to investigate everything in the house, particularly the stove and radio. He also enjoys helping his mother put clothes in the washing machine. Tommy has developed normally in all areas except language expression. It has been felt that he comprehends language better than he is able to express himself. Although he has tended, in general, to be a rather quiet child, Tommy does, at times, make quite a number of different jabbering sounds, and makes himself understood by grunting sounds which have very obvious inflections. The first words he said were "mama" and "dada", which he said at ten months of age. At seventeen months, while still saying these words, Tommy had added only "bow-wow" to his vocabulary. Tommy also continued to be a thumb-sucker, although this habit became less violent. He no longer sucked it so frequently, but only when he was tired or hungry.

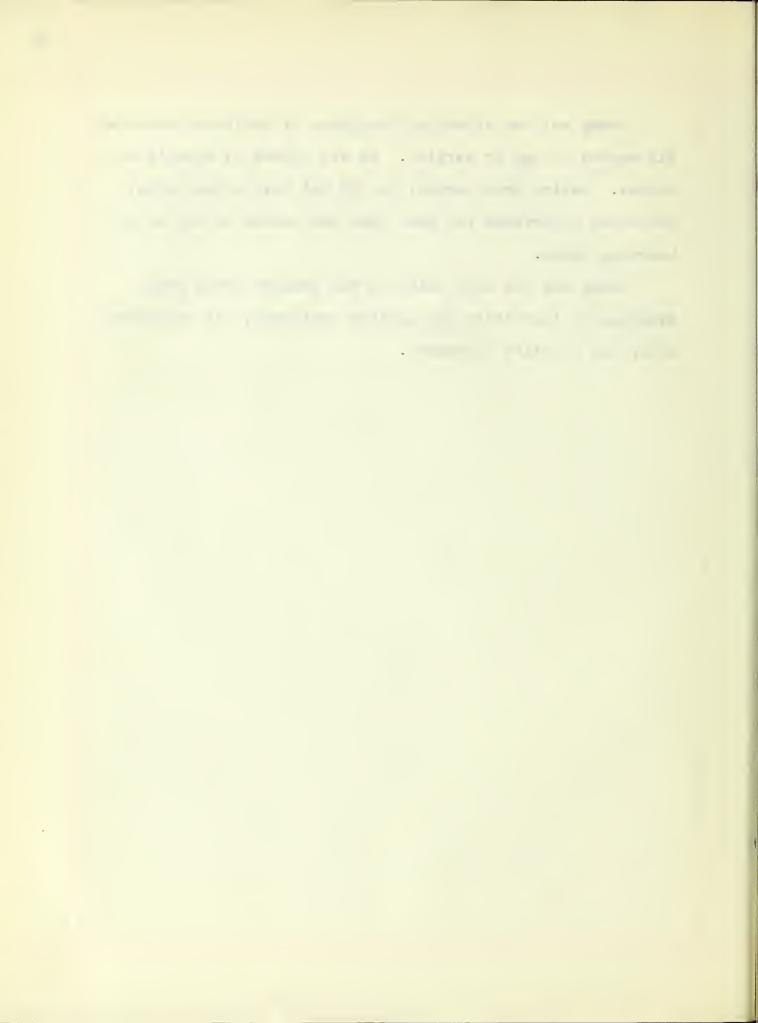


#### INTERPRETATION

Tommy's experience during his first four months was a very frustrating one. For this period, he was unable to get satisfaction for his two most important needs: food and love, with the accompanying sense of security, from one consistent mother person. In addition to his inability to get a satisfactory amount of food ingested, Tommy's security was further disturbed by the five different replacements within his first four months. The fact that Tommy's mother was unhappy and disturbed during the pregnancy, plus the fact that Tommy was an unwanted child would seem to account for his "feeding problem", for which no organic base could be determined. The experience of so many different "mothers" in his short life would seem to suggest the reason for his lack of discrimination before placement in the adoptive home. His ability to become more discriminating after placement gives evidence of his sense of security in the adoptive home. spite of his rather easy adjustment to the adoptive home. Tommy did carry over into it symptoms of his earlier oral frustration. His thumb-sucking, while becoming less obvious, continued to be his way of reacting to the disturbing experiences of hunger and fatigue. Closely related to this was Tommy's definite retardation in the language area. While he indicated contentment in his adoptive home, Tommy was unable to over-come completely the effects of his early frustrations.

Tommy was the oldest of the group of children placed at six months of age or earlier. He was placed at exactly six months. During this period, he did not have a consistent mothering experience for more than two months in any of his boarding homes.

Tommy was the only child in the younger group whose symptoms of insecurity and anxiety continued, but decreased, after the adoptive placement.



## CHILDREN PLACED AT ONE YEAR OR OLDER

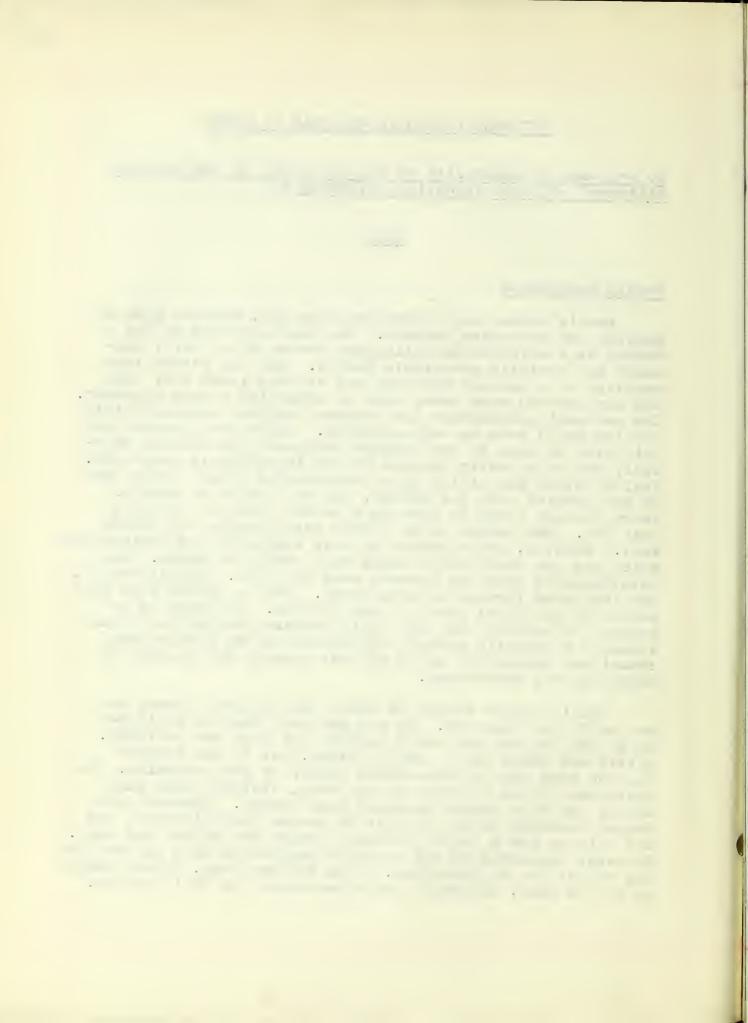
No symptoms of insecurity or anxiety prior to the adoptive placement and none appearing following it

#### PAUL

## Family Background

Paul's mother was a nineteen year old, married girl of English and Portugese descent. She was described by the worker as a maladjusted delinquent member of a fairly adequate and socially acceptable family. She was forced into marriage to a soldier when she was sixteen years old. and her husband were never able to establish a home together. The maternal grandmother had assumed complete responsibility for the child born to this marriage. Plans for divorce were initiated as soon as the husband returned from service overseas, but only partly because of the illegitimate pregnancy. Paul's mother was living in a questionable place at the time of her contact with the agency, and was unable to make or carry through plans to move to a decent place or to get a real job. She seemed to be fairly intelligent, and talked well. However, she appeared to have standards and aspirations which she was emotionally completely unable to reach. relationships with her parents were not good. Educationally, she indicated further maladjustment. Paul's mother left high school in her first year, at age fifteen. She gave as her reason for leaving the fact that, because she had previously attended a Catholic school, adjustment to the public high school was impossible as it did not provide the routine to which she was accustomed.

Paul's mother wished to marry the alleged father, who was an Irish fisherman. It was her hope that he would set up a home for her and would provide for both her children. Little was known about Paul's father, but it was learned that he came from a responsible family of good standing. He indicated little interest in the baby, visiting only once during the nine months boarding home period. However, the foster boarding mother thought he seemed "intelligent", and she felt he had a "nice attitude" toward the mother and baby. He never responded to the worker's suggestion that he come to the office for an interview, so he was not seen, either there or at his home, although visits were made for that purpose.

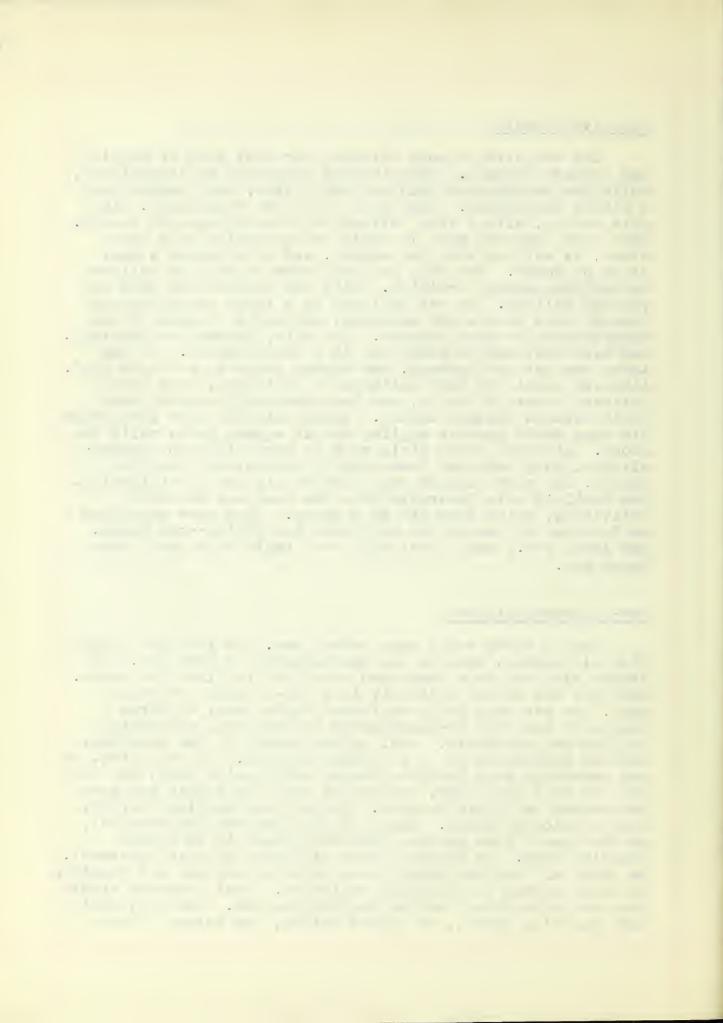


#### Adoptive Parents

The adoptive parents selected for Paul were of English and Swedish descent. The wife was described as "vivacious", while the husband was said to have a slow, easy manner, and a kindly expression. They were both very responsive, likeable people, with a very noticeable friendliness and warmth. They were free and easy in their relationships with each other, as well as with the worker, and both showed a real sense of humor. The wife had two years of college followed by business school training, while the husband had just one year of college. He was employed by a large manufacturing company as a laboratory mechanic, and was in charge of all experiments for that concern. The wife, before her marriage, had been employed as a hostess in a chain bakery. It was there she met her husband, who worked there as a "floor boy". Although unable to have children of their own, they were anxious to have a family, and had previously adopted twin girls through another agency. These children were four years old when their parents applied to the agency for a child to adopt. Although these girls were of very different personalities, they both had been readily assimilated into the family, and were handled very sensitively and intelligently. The family's main interests were the home and out-door activities, which they did as a group. They were described as the kind of people who celebrate everything -- new homes, new jobs, etc., and it was felt that their home was a very happy one.

# Pre-placement History

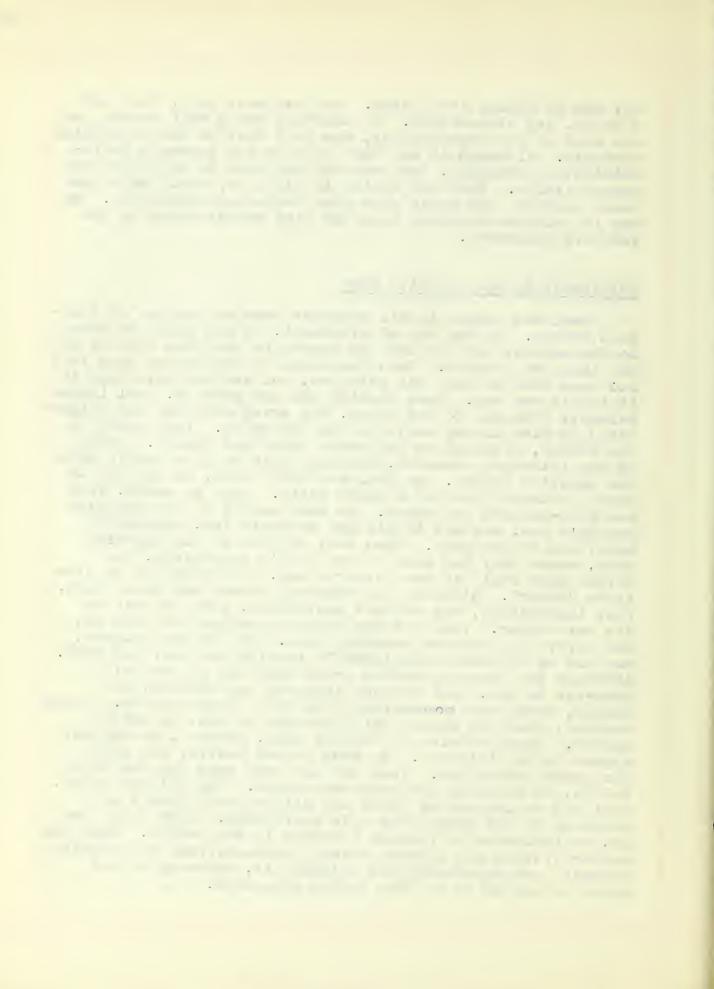
Paul's birth was a very normal one. He left the hospital with his mother, when he was approximately a week old. He stayed with her in a furnished room for his first few weeks, and then was placed privately in a sub-standard boarding home. He was very badly neglected there, and, at three months of age, was re-admitted to the hospital with malnutrition and acrodynia. Paul gained slowly in the hospital, and was considered to be a feeding problem. At that time, he was described as a passive, inert, and fragile baby, who was felt to be a good baby, because he cried so little and gave the nurses so little trouble. During this hospital period, Paul developed eczema. Upon his release from the hospital, at the age of five months, Paul was placed in an agency boarding home. He reacted quite violently to this placement. He cried all day and night, and, while he ate all his feeding, he never seemed to be really satisfied. Paul demanded almost constant attention from the boarding mother. However, during this boarding period, he gained weight, the eczema cleared



up, and he became less fussy. For the most part, Paul had a happy, gay disposition. At thirteen and a half months, he was seen by the psychologist, who felt that he was developing normally. Although it was felt that he was somewhat indiscriminately friendly, this was not believed to be beyond the normal limits. Paul was active in his play, would smile and laugh readily, and would also show temper appropriately. He was in this one boarding home for nine months prior to the adoptive placement.

## Adjustment in the Adoptive Home

Paul was placed in his adoptive home at the age of fourteen months. On the day of placement, he was eager to come to the worker, but did show an uncertain reaction when he met the adoptive parents. This indicated to the worker that Paul had some idea of what was going on, and was participating in it in his own way. Upon meeting the new parents, Paul looked solemnly from one to the other, and cried when the new father tried to pick him up early in the interview. Paul clung to the worker, although he had never done this before. Later in the interview, however, Paul was able to play easily with the adoptive father. As Paul was very tired, he was put to sleep in the office for a short while. When he awoke, Paul was good-natured and happy. He went easily to the adoptive parent's car, and sat in his new mother's lap, apparently happy and comfortable. When they arrived at the boarding home, where they had gone to get Paul's belongings, the worker gave Paul his new father's hat, and asked him to give it to "daddy". Although the boarding father was also there, Paul immediately, and without hesitation, gave the hat to his new father. Paul let the adoptive mother pick him up, and carry him from the boarding home. He did not protest, nor did he indicate reluctance in Leaving the boarding home. Although the boarding mother cried over him as she said good-bye to him, Paul did not indicate any concern, but rather, submitted nonchalantly to this demonstration. Later, however, when the worker said good-bye to him, he cried openly. Upon arriving at his new home, however, he did not appear to be disturbed. He went to bed easily, and slept throughout the night. Paul did not even wake for the night bottle, to which he had been accustomed. The following day, Paul was taking orange juice and milk eagerly from a cup, although he had never done this previously. From that time on, he indicated no further interest in the bottle. When the worker visited him a month after placement, Paul was feeding himself, and apparently was enjoying it, although he had never attempted to do this before placement.



When Paul recognized the worker, at the time of her first visit in his new home, he looked hesitant momentarily, and seemed to turn to his new mother for reassurance. he apparently sensed this, he became friendly immediately and was eager to come to the worker. He played around her very happily and independently. It was felt that Paul had matured considerably since his placement in the adoptive home. Although Paul had been somewhat wild in the boarding home, because of the lack of discipline, he was much more quiet, though normally active in the adoptive home. Paul was very much at ease in his new home, and seemed to have "taken on" the twin sisters, as well as the rest of the family, and obviously enjoyed playing with them. In his new home, Paul became quite a demonstrative child, and would hug and kiss members of the family on his own initiative. He had never done this in the boarding home, even though he was devoured with affection. When the adoptive mother corrected him for something he had done, Paul never showed temper or annoyance, but responded easily, although she spoke gently, but firmly to him.

Paul is hilariously happy when his new father comes home from work, and will tag along after him wherever he goes. He particularly likes to sit with his father on the tractor, with which the family cultivates some of their property. Like the rest of the family, Paul loves to be out-doors, and appears to have a wonderful time with his new family. He is a strong, aggressive child, who loves to tease his sisters and his mother, and indicates a real sense of humor in his activity. Although devoted to his new father, Paul also indicates a real attachment to his mother. When he was ill with chicken pox, and not feeling well, Paul clung to his new mother for sympathy. For the most part, he is a very happy, serene child, and very much at home with his new family.

## INTERPRETATION

Although Paul experienced a very disturbing first few months, and reacted to it with very definite symptoms of anxiety and insecurity, he was able to gain a sense of security in the boarding home, where he lived for the nine months prior to his placement in the adoptive home. For Paul,

this placement approximated a permanent home, and helped him in his move to the adoptive home by giving him a sense of security and of being wanted. Although he was uncertain when he first met his new parents, Paul was able to participate in his own adoptive placement. In spite of the fact that they were strangers to him, Paul obviously "chose" his new parents. That he was perfectly at home with his new parents, almost from the beginning, was indicated in his immediate adjustment to his new home. The first night, he slept without waking for his accustomed bottle, and expressed, it would seem, his understanding and acceptance of a new period in his life. From then on, Paul had no further interest in the bottle, and, shortly thereafter, began to feed himself. His complete contentment in the adoptive home was further indicated by his lack of fear of strangers, his decreased, though normal, activity, and his demonstration of affection, from the beginning, for members of his family. It was particularly significant that he was not able to express affection for his devoted boarding parents, but was able to do so almost immediately after his placement in the adoptive home.

Three other children, who exhibited no symptoms prior to the adoptive placement or afterwards, also had a consistent boarding home experience prior to the adoptive placement. One of these children was placed in a boarding home

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which became an adoptive home when the child was two years old. He had spent all except the first few weeks of his life in this boarding home. The other two children were in agency boarding homes for periods of fourteen and sixteen months just prior to the adoptive placement. For all of these children, the boarding home placement was with very devoted parents, who gave an unusual amount of love and attention, and this experience, consequently, approximated for these children the permanent home situation.

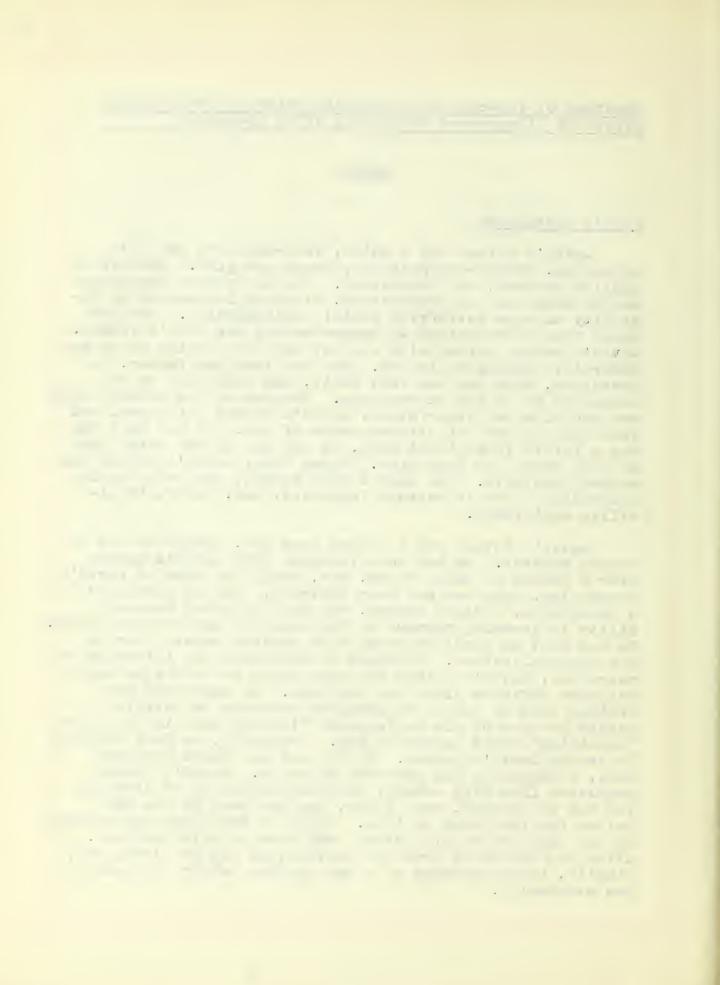
Symptoms of insecurity and anxiety prior to the adoptive placement disappeared completely after placement

#### DAVID

## Family Background

David's mother was a quiet, well-mannered and nice appearing, twenty-one year old, unmarried girl. She was of English descent, and Protestant. The caseworker described her as able and self-sufficient, although indicating an inability to make satisfying social relationships. She had never really been close to anyone except the baby's father. David's mother talked with a great deal of feeling about her generally unhappy childhood. She had lost her father, by desertion, when she was very small, and continued to be concerned as to his whereabouts. Because of the unhappy life she had with her step-father, David's mother left home, and went "on her own" at sixteen years of age. It was felt she was a fairly intelligent girl, as she was in her third year of high school at this time. Since then, David's mother has worked regularly. She made a good record, and held fairly responsible jobs in defense factories, and, later, in civilian employment.

David's father was a thirty year old, unmarried man of French descent. He had been friendly with David's mother over a period of three years, but, until the time of David's conception, they had not been intimate. He was described as a thoughtful, serious person, who had indicated responsibility in assuming payment of the hospital and doctors' bills. He had kept in constant touch with David's mother, during her hospitalization. Although he expressed his intention to marry her, David's father was very vague as to why he could not make definite plans for marriage. He expressed the feeling that he wanted to postpone marriage to David's mother because of his undiagnosed "illness" and his fear that "something" would happen to him. Gradually, he lost interest in seeing David's mother. He did not pay board for the baby, although he had promised to do so. David's father graduated from high school, with the intention of studying for the priesthood, but, later, decided that he was not suited for that kind of life. Until he went into the service, he was employed by his father, who owned a milk business. After his discharge from the service, he did odd jobs, and, finally, became manager of a gas station, which he hoped to own eventually.



## Adoptive Parents

David's adoptive parents were in their early thirties. They had been married ten years, but were childless. Both were of English backgrounds. The husband had graduated from high school, following which he took a mortician's course for six months. He then entered this profession, Which, before his death, had also been his father's occupation. Although still employed by a friend, the husband hoped eventually to go into partnership with his friend, or to set up his own undertaking establishment. The wife, also, attended high school, and studied to become a beautician. Although she had a license to do this type of work, she did not work after her marriage. It was felt both of these people were unusually stable, happy, and idealistic. They seemed to have been able to comfortably assimilate their irregular childhood experiences. The husband's father died when the boy was eleven years old, and, at that time, he went to live with friends, as his mother felt they could give him more opportunities than she could. However, they were very strict and rigid in their ideas concerning child raising. When they could not understand his wish to follow his father's occupation, and refused to help him accomplish his goal, he left them and returned to his mother, who had since remarried. He felt his relationships with members of his family were good, and felt that, because he was self-supporting, his step-father was able to accept him. The wife, too, had lost her father, but by divorce, when she was three years old. When her mother planned to remarry, she talked thoughtfully with her children, and enabled them to more easily accept the step-father, of whom they were very fond.

It was felt that the wife was the gayer, quicker, more imaginative person, who was perhaps more intelligent than her husband. He seemed, however, to have a sensitivity and awareness of other people's feelings. Although he was described as having a somewhat solemn, dignified manner, it was felt that he was basically sincere. Both the husband and wife participated thoughtfully in discussing children's needs, and, while the wife was more open in expressing her feelings, it was felt that they both were eager and anxious to become parents. Each of them expressed the feeling that the other would make a "wonderful" parent.

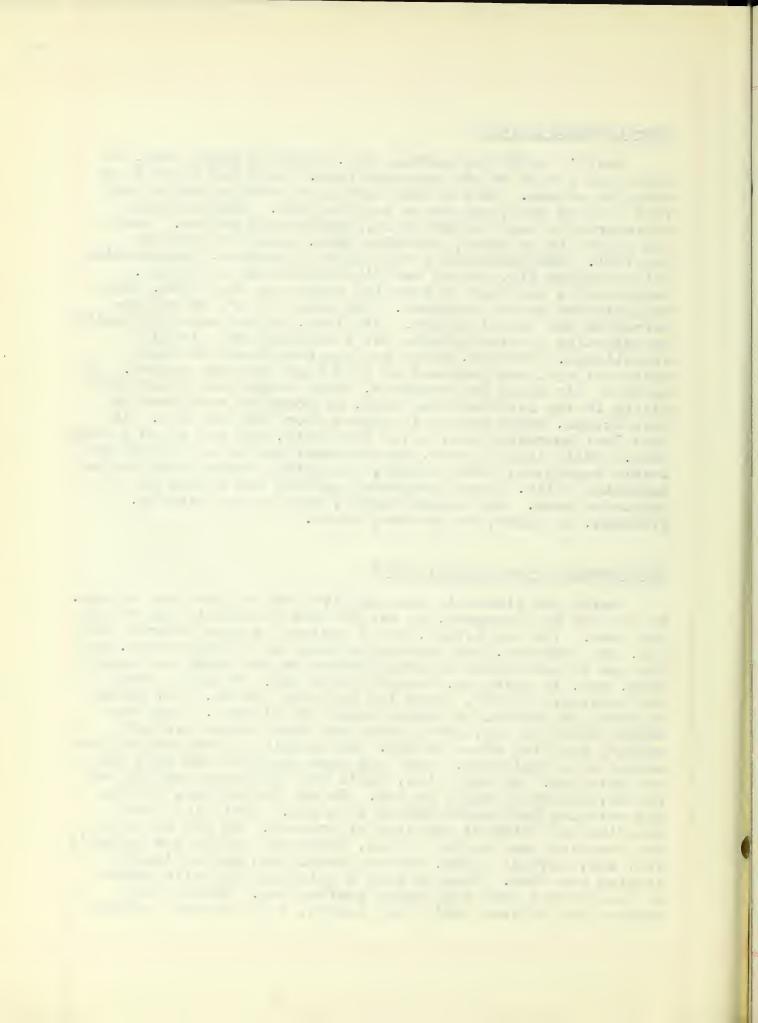
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## Pre-placement History

David's birth was normal, but, within a short time, he developed a rash on his legs and face. This was later diagnosed as eczema. He was described as a strange looking and very passive baby, who had a serious look. When meeting strangers, he had a solemn gaze, unlike most babies. was placed in an agency boarding home, directly from the hospital. Approximately a week after placement, the boarding father became ill, making David's replacement necessary. Because of a shortage of boarding homes, at that time, David was returned to the hospital. Two weeks later, he was returned to the boarding home. At first, he had some difficulty in adjusting to his formula, but a schedule was finally established. However, David was again replaced at four months of age, and remained in this home for nine months. spite of his early replacements, David seemed to adjust quite easily in the last boarding home, although he continued to have eczema, which varied in degree from time to time. In this last boarding home, David was loved, and was given a real While in this home, he was described as a composed and stable youngster, whose steady, thoughtful manner made him an appealing child. David responded quickly and nicely to people he knew. He laughed easily, when he was pleased, although, at times, he was very sober.

# Adjustment in the Adoptive Home

David was placed in the adoptive home at one year of age. On the day of placement, he met his new parents in the boarding home. The new father, while anxious to make friends with him, was composed, and gave David time to get acquainted, but the new mother talked to David before he was ready to accept them, and, in doing so, caused him to cry. Within a very few minutes, however, David let her pick him up, and, as she carried him around, he seemed happy and at ease. When the worker spoke to him, David threw his arms around his new mother, cuddling close to her. He quickly looked back at the worker in a contented, "coy" way that suggested he knew what was going on. By that time, David had also accepted his new father, and went easily to him. He sat in his lap, playing and entering into conversation with him. David left the boarding home without any sign of protest. On the way from the boarding home to the office, David sat in his new mother's lap, and, several times, turned toward her, and seriously studied her face. Then he gave a quick little smile before he dropped his eyes and leaned against her. Before they reached the office, David fell asleep, still leaning against



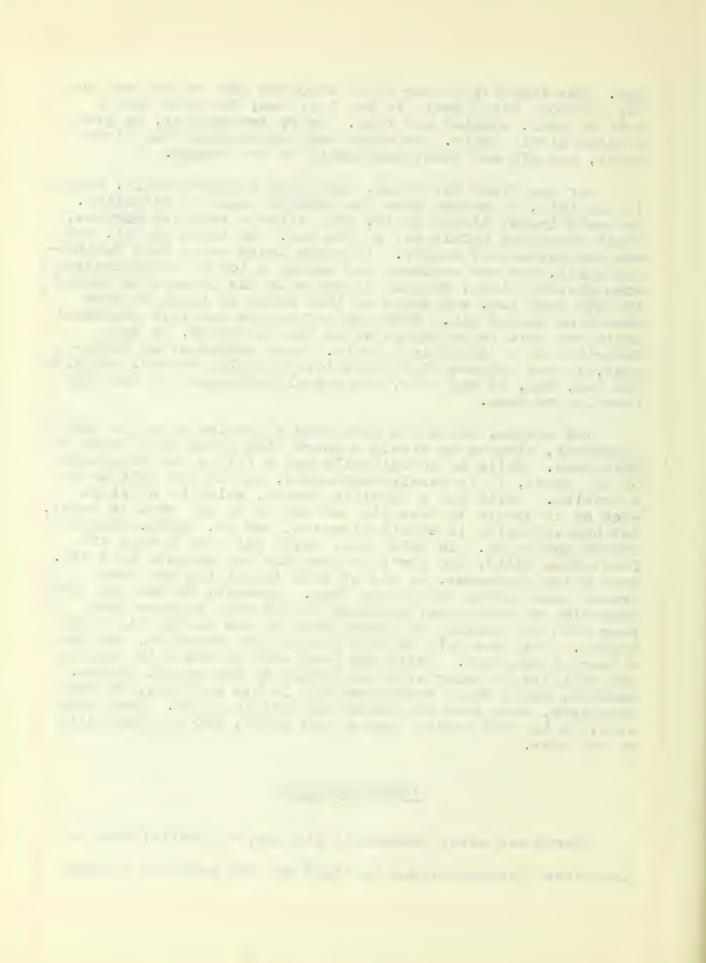
her. The adoptive mother later reported that on the way to his new home David knelt in her lap, and, for more than a half an hour, studied her face. Every few minutes, he gave a quick little smile. He slept very comfortably the first night, and did not react negatively to the change.

For the first few weeks, David had a night bottle, which, it was felt, he wanted more for sucking than for nutrition. He would ingest little of it, and, after a very few minutes, would throw the bottle out of the bed. He loved to eat, but was not ravenously hungry. Although David was a very deliberate child, who was serious, and showed a lot of concentration when playing alone, when he played with his father, he seemed to have real fun, and would go into gales of laughter when something amused him. Although before the adoptive placement David was felt to be happy, after the placement, he was described as a "twinkling" child. Four months after placement, it was noticed that David loved to play around, and with his bed, and, it was felt, had a real attachment to his own room in the home.

The eczema, which had been such a problem prior to the placement, cleared up within a short time after David went to this home. While he occasionally has a little red roughness on his hands, it is barely noticeable, and is not felt to be a problem. David has a terrific temper, which he displays when he is unable to have his own way or to get what he wants, but his attention is easily diverted, and he, again, becomes serene and happy. In this home, David has been a very affectionate child, who loves to have his new parents hold him. Soon after placement, he was at ease in putting his arms around their necks and loving them. However, he has not been demanding of attention, although he did want to have them stay with him during the period when he was having his night bottle. This was felt to be a desire for attention, and not a fearful reaction. David has been very poised with people, and delights in going with his mother to her social groups. Earlier, David would remain happily in his carriage, on such occasions, even when his mother was not in sight. Now, however, he is very active, and a busy child, who is constantly on the move.

## INTERPRETATION

David was able, because of his age, to participate in the actual placement, and to "take on" the adoptive parents



from the beginning, in his own, thoughtful way. The fact that he seemed to need a bottle for sucking purposes, the first few weeks, would indicate some unsatisfied need. However, he did indicate some aggression and hostility in connection with it, as he would throw the bottle out of his bed, after sucking it for only a few minutes. It was felt that, because he was able to sense the security of the adoptive home, he became a lighter, more "jolly" child than he had been previously. His early boarding experience provided him with a great deal of love and security, enabling him to move on into the new experience without fear, and helped to make an easy adjustment possible. That this experience was, for him, a happier one than his earlier one had been was evident in the fact that, shortly after the adoptive placement, the eczema, which had been such a problem earlier, cleared up and was no longer a problem. This symptom was felt to be very definitely of an emotional nature, and a reaction to his earlier insecurity.

One other case, in which the symptoms disappeared after placement, was that of a child who, also, had a consistent boarding experience for nine months prior to the adoptive placement. She, too, had earlier allergic reactions of an emotional nature, which were not evident after placement. Only after several months in the adoptive home was this child able to show a normal aggressive reaction about things.

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Symptoms of insecurity or anxiety prior to the adoptive placement continued, but decreased, after placement

#### SUSAN

### Family Background

Susan's mother was a forty-one year old married woman, and the mother of five other children. She was separated from her husband, who had the custody of the four oldest children. He denied paternity of her four year old son, whose real father was never identified. Susan was the sixth child. Her mother was employed in a dress factory. Little was known about the mother's background, although it was known that she was born in Greece and came with her mother to the United States, when she was six or seven years old. Later, they both returned to Greece for a visit, but Susan's mother was left there with relatives when her mother came back to this country. She lived there until she was about thirteen years old, when, upon the death of her grandmother, she was returned to this country. A month after her arrival in the United States, her mother died. Her father then sent her to live with his sister, who, according to Susan's mother, "made a slave of her". She later married a man chosen by her aunt, in order to get away from this unhappy life.

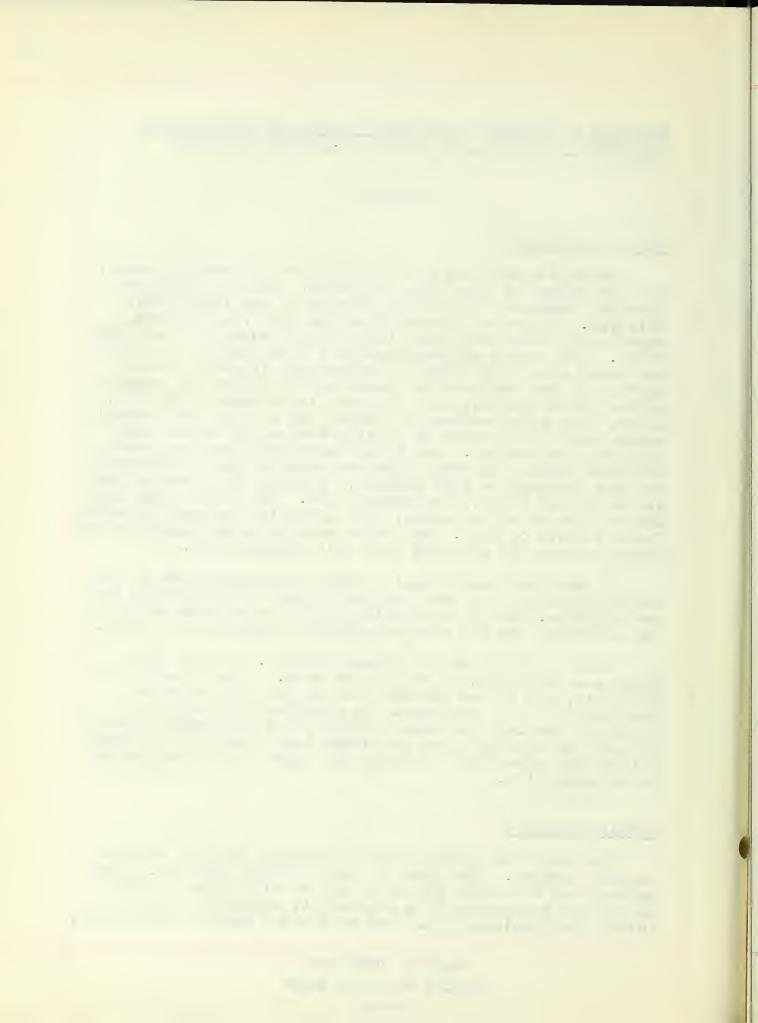
It was felt that Susan's mother was mentally dull, and completely unable to make realistic plans for either of the two children. While emotionally unable to release the boy for adoption, she did wish an adoptive placement for Susan.

Susan's father was of German descent. At the time Susan was conceived, he was in the Army. Little was known about him, but it was learned that he had been married previously and was divorced. He admitted paternity and talked of marriage to Susan's mother, but this never materialized. He also promised to assume some financial responsibility, but never did. Nothing was known of his background or personal life.

# Adoptive Parents

The adoptive parents chosen for Susan were of Dutch and English descent. They were in their middle thirties. The husband was a college graduate, and an electrical engineer. He had the appearance of a successful, aggressive, and intelligent business man. The wife was a small, very dainty,

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feminine person, who had a high school education. She had been employed as a clerical worker following her graduation. Her childhood had been rather an irregular one. Both her father and brother died when she was about three years old. As her mother had been hospitalized some time earlier, and was unable to take care of her, she was sent to live with friends, and stayed with them for several years. Although indicating an understanding of the needs of the child who is unable to live with his own parents, she did not feel that this experience had been a disturbing one for her.

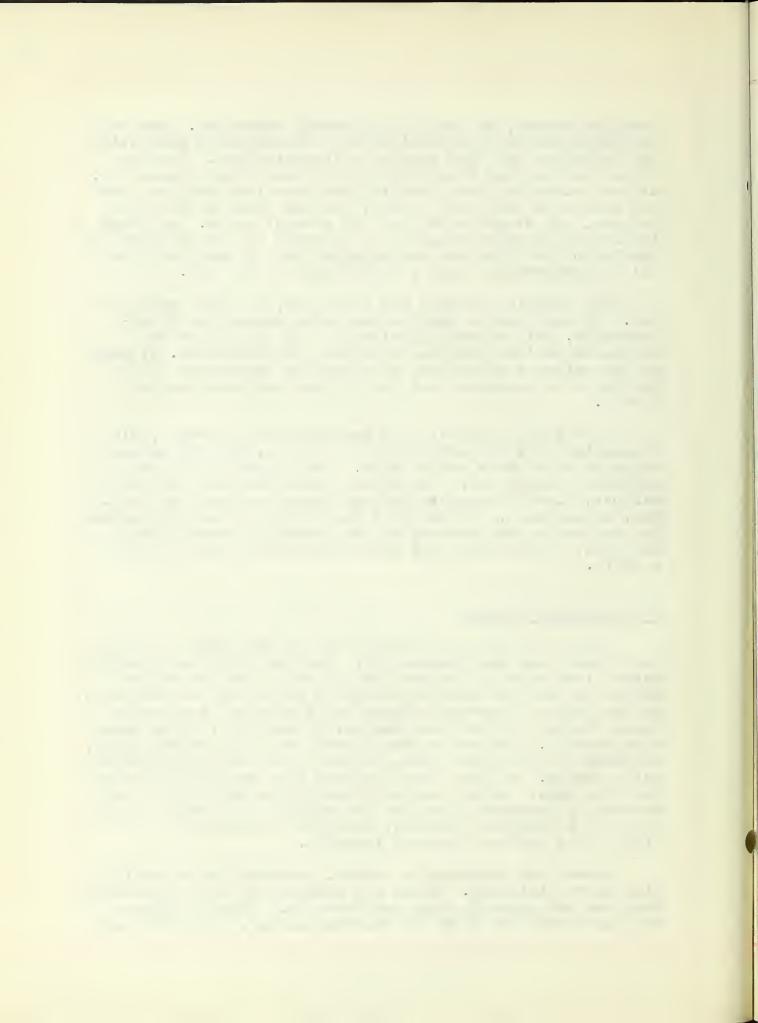
The adoptive parents had one child, an eight year old boy. It was thought that he was quite precocious intellectually, but retarded physically. He had had an undiagnosed medical problem throughout his childhood. Although he had gained a great deal of attention because of it, it was felt, in general, that the problem had been handled wisely.

This family did not have many outside interests, although the wife was president of a P.T.A., and the husband belonged to a men's social club. Their family life was a stable and happy one. The parents were described as very serious, almost overconscientious people rather than free, gay, social ones. It was felt that the wife took motherhood too seriously, but because of the warmth and stability of the home, it was felt that these parents had much to offer a child.

# Pre-placement History

Susan's birth was normal so far as was known, and her development had been uneventful. For the first three months, Susan lived with her mother, but at that time her mother requested that the baby be placed in an agency boarding home. At the time of placement, Susan had a rash and was having minor feeding difficulties caused, it was felt, by an overrich formula. She was a rosy cheeked baby and seemed happy, although for the first three months in the boarding home was quite stolid. At this time, another baby was placed in this boarding home. Susan reacted violently to this child, and constantly demanded attention and wanted to be held. Except for this particular reaction, Susan was described as a "lump", and was very fat and inactive.

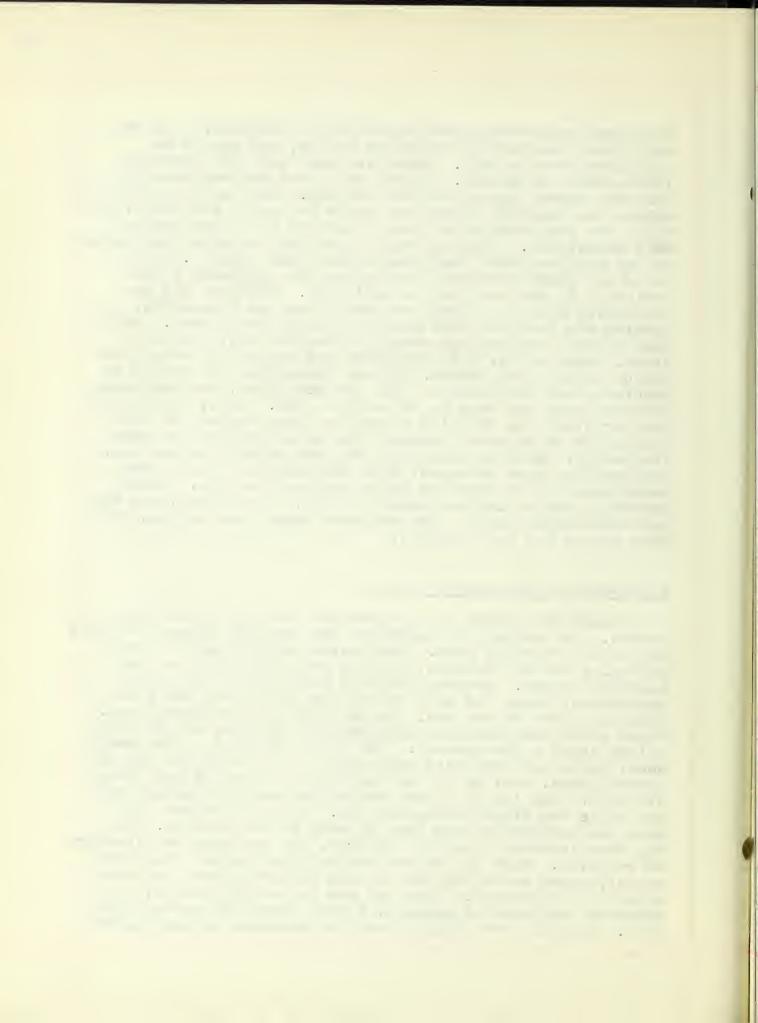
Later, she developed a temper, and would occasionally bite quite viciously. Susan was examined by the psychologist when she was approximately one year old. This report, as well as interviews with the boarding mother, indicated that



Susan was very unhappy and insecure in this home. She was not quickly comfortable with new people, and had to be approached very slowly. Susan was very shy, and becoming increasingly withdrawn. It was felt that she was more shy than was normal for a child of her age. She was not satisfied unless the boarding mother was close to her at all times, and would not stay even with close relatives with whom she was well acquainted. This was felt to be particularly significant as she had been very comfortable with them earlier. Susan would not sleep at night, but during the day would sleep curled up in the boarding mother's lap. When she did occasionally sleep at night, she would wake up frequently, choking and snorting, and obviously quite frightened. During some of the time she was awake, during the day, she was a happy, sunny child, but frequently had temper tantrums, and would struggle and scream. It was impossible for anyone to handle her at these times. For the most part, the tantrums occurred when she woke up or at bath time. Also, Susan would bite or pinch the boarding mother or other members of the family for no apparent reason. She seemed to do this more frequently, and more viciously than was normal for her age. She was also more dependent upon the boarding mother than would normally be expected for a child of her age. Susan suddenly took a dislike, almost a fear, of her crib, and was not comfortable in it. She was most happy when eating, or when having her hair brushed.

# Adjustment in the Adoptive Home

Susan was placed in this home at the age of fourteen months. On the day of placement, the adoptive parents visited her in the boarding home. She indicated interest in being friendly, but was fearful, running away from them to the boarding mother. However, after a long period of getting acquainted, Susan was able to let her new father carry her from the house to his car. As they left the boarding home, Susan cried and indicated considerable anxiety, but did fall asleep after a few minutes. The first few days in the new home, Susan was obviously very upset. She would not eat for several days, and, as in the boarding home, would not sleep at night. She insisted upon having the adoptive mother hold her while she slept during the day. Susan cried terribly when the new father went away to work in the morning. was very jealous of her new brother, and resented the attention he received. When the mother was helping him get ready for school, Susan would pull at her new mother's dress to attract attention to herself. When she was put on the toilet, she screamed, and was, in general, a very tense, disturbed little girl. She was very unhappy when the adoptive mother was out



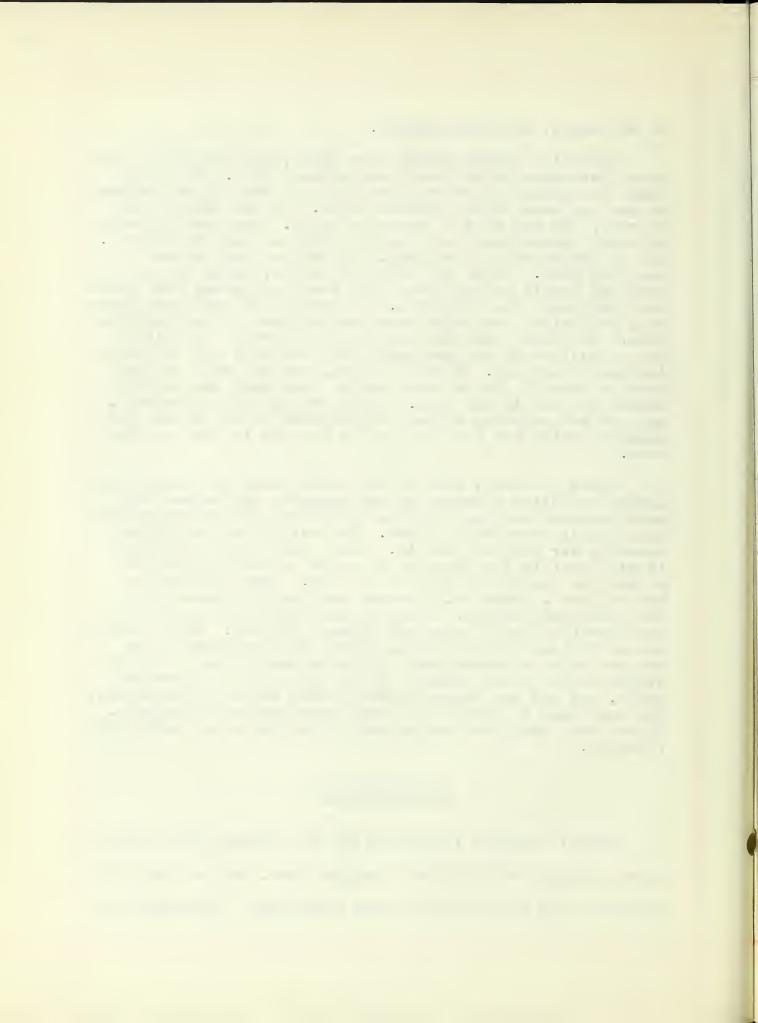
of her sight, and cried easily.

Gradually, Susan became less tense, and was able to run about the house quite freely and without fear. She cried less frequently, and more appropriately, and did not whimper as she had done in the boarding home. As she became less fearful, she was able to sleep at night. When she did wake at night, Susan would stay in the crib and talk to herself. She no longer woke up choking, the way she had in the boarding home. After the first few weeks, Susan was able to meet new people without fear, and would go to the door whenever she heard the door bell. She became friendly and playful, and smiled much more than she had done in the boarding home. It seemed that she had taken on some of the spirit and enthusiasm of the new home. Her activity and curiosity increased markedly. Within a month, she was able to keep busy by herself, for a short while, even when the adoptive mother was not in the room. Susan ceased soiling herself, and did not continue either the tantrums or the biting and pinching which had been so great a problem in the boarding home.

Susan gradually came to the point where she could stand having attention directed to her brother, and became very much attached to him, in spite of his obvious conscious and unconscious resentment of her. She was quite open in expressing her devotion to him. After the first few months, it was possible for Susan to tolerate separation from her mother for reasonable periods of time. When left with a baby-sitter", Susan would become very much at ease, after the first few minutes. However, she continued to indicate considerable anxiety when her mother left her. When a new worker visited several months after the placement, Susan was not able to accept her. Although she did not cry, she stayed close to her mother. Susan was still a determined child, but did not react violently when she was disciplined. She continued to develop in every area except in language. It was felt that her development in this area was definitely retarded.

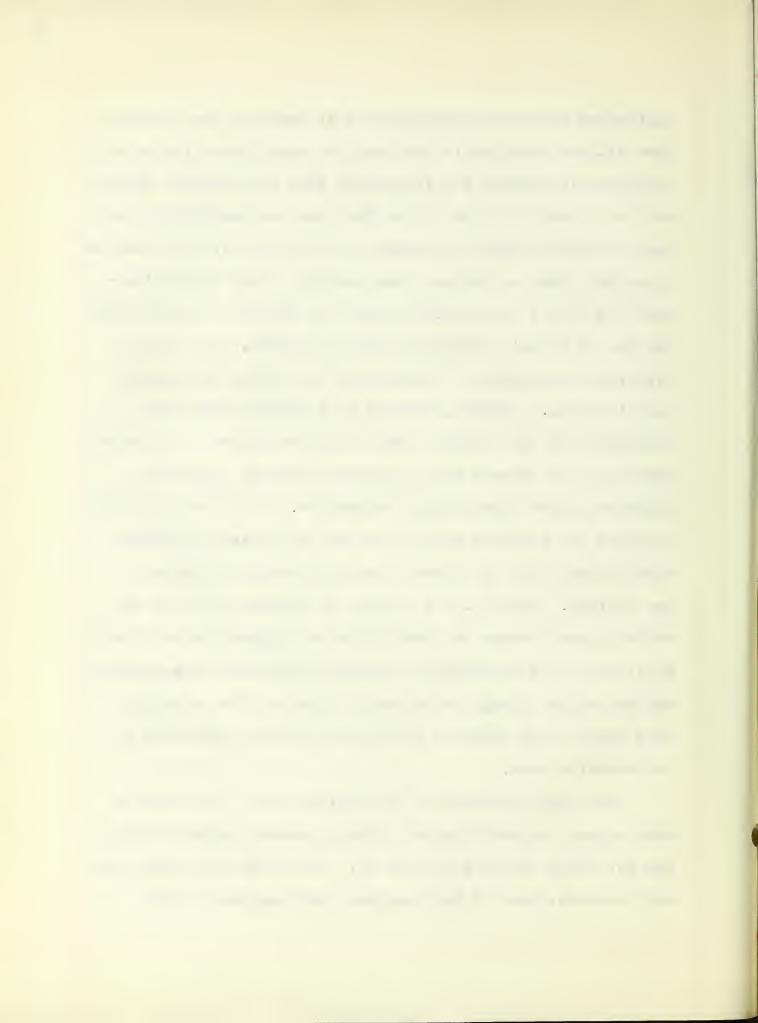
# INTERPRETATION

Susan's obvious insecurity in the boarding home was, in part, carried over into the adoptive home, and persisted for the first few months of this new experience. Although the



aggressive behavior characteristic of Susan in the boarding home did not continue in the adoptive home, Susan indicated considerable anxiety and insecurity when the adoptive mother was not present. It was clear that she was comfortable and secure with the adoptive mother, and did not have the need to pinch and bite, as she had done earlier. That this adjustment did take a considerable period of time would seem to be related to Susan's relatively late placement, and to the disturbing experience of insecurity she had in the agency boarding home. However, because of a rather consistent experience in the boarding home, Susan was able to relate to people and to express her unhappiness through aggressive behavior rather than through repression. That she had really accepted the adoptive home as her own was clearly indicated when she was able to tolerate having attention directed to her brother. Earlier, the arrival of another child in the boarding home seemed to precipitate her aggressive behavior, as it meant the necessity of sharing the mother person before she was secure enough to be ready to do so. For a while, this need of the mother's undivided attention persisted in the adoptive home.

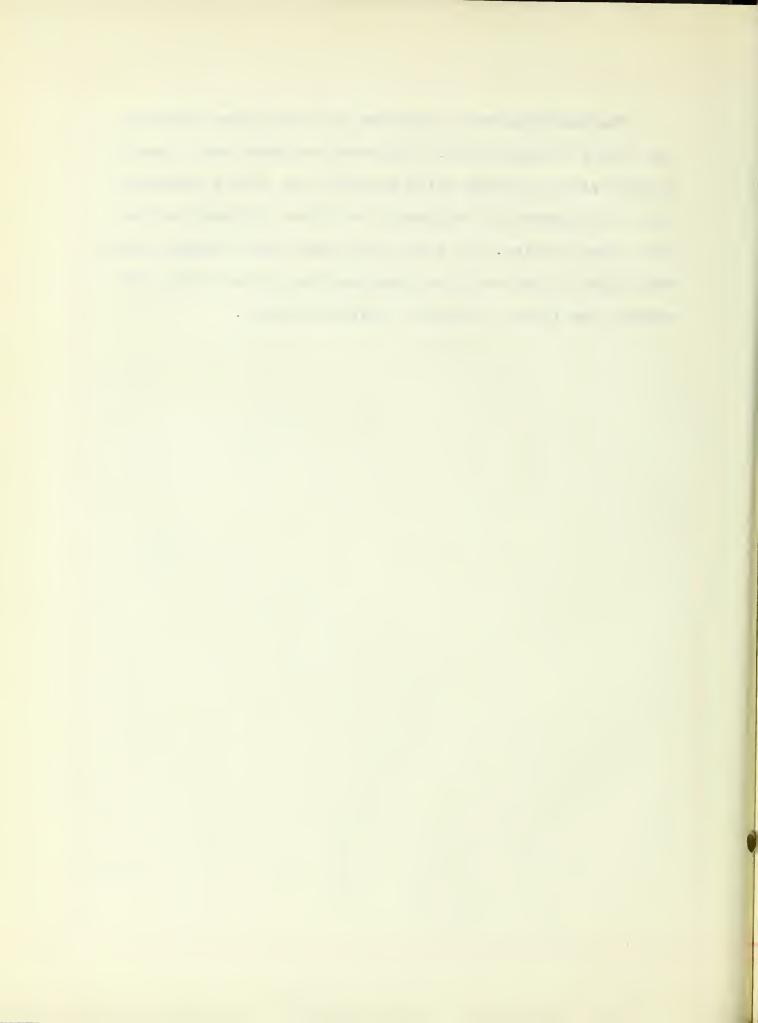
That Susan, because of her age, was able, at least to some extent, to participate in the placement indicates that she was ready and able to take it. While her adjustment was not complete, many of her symptoms did disappear almost



immediately after the initial period of adjustment in the new home, and those that did not disappear, decreased markedly. That Susan was replaced at the time when she would normally be expected to begin to talk would seem to account for her retardation in the language area, and is, undoubtedly, related to, and a reaction to the emotional disturbance caused by her replacement.

The most common characteristic of the three other children in this group was their great anxiety when separated from the adoptive parents for even a short period of time. It would seem to be based on the fear, born of insecurity, that the parents would not return, and, inherent in this, the basic fear of not being loved. One child, placed at two years of age, was not able, for some time, to make his first independent demonstration of affection for the family, although he did like to be fondled. Only after several weeks in the new home was he able to play outside alone or with other children. He gradually developed a little sense of humor, which he had not had previously. One other child was able to begin to be "bad", whereas he had always been "good". His speech improved, he began to sing, developed a very happy laugh, and shortly began to talk about "our house", "my room", etc., and was no longer the too quiet little boy he was before placement. One child did not indicate anything further than that already presented.

.  The boarding home experience of these three children was a very irregular one. They were replaced many times, either before or after being accepted for agency boarding care. The number of replacments of these children varied from three to nine. In every case, the last boarding placement prior to the adoptive placement was for at least nine months, the longest being for thirteen months.



#### CHAPTER IV

### SUMMARY AND FINDINGS

Although statistical conclusions would not be valid in a study of eighteen cases, the writer feels that some quantitative analysis of the cases presented will be helpful to the reader in better understanding the qualitative conclusions presented in Chapter V.

of the eighteen cases presented in the preceding chapter, eight were of children placed for adoption at the age of six months or earlier. In this summary, these will be considered as "Group I". The ten other cases studied were of children placed for adoption at one year of age or older. These will be considered "Group II". Tables I and II show the sex and age distribution at the time of the adoptive placement.

TABLE I.

SEX OF CHILDREN PLACED AT SIX MONTHS OF AGE OR EARLIER
AND AGE AT TIME OF ADOPTIVE PLACEMENT

Months of Age	Male	Female	
1 - 1.9	1%		
2 - 2.9	2		
3 - 3.9		2	
4 - 4.9	1		
5 - 5.9	1		
6 - 6.9	1		
Total	6	2	

<sup>\*</sup> This child was placed in a boarding home which became an adoptive home within the first month.

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TABLE II.

SEX OF CHILDREN PLACED AT ONE YEAR OF AGE OR OLDER AND AGE AT TIME OF ADOPTIVE PLACEMENT

Months of Age	Male	Female
12 - 14.9 15 - 17.9 18 - 20.9 21 - 23.9 24 -	2 2 1 2* 1	2
Total	8	2

<sup>\*</sup> One of these children was placed in a boarding home which became an adoptive home during this period.

The youngest child in Group I was placed at the age of one month, while the oldest, was placed in his sixth month. Seventy-five per cent of the children in this group were boys, while only twenty-five per cent, those placed at three months, were girls. The youngest child in Group II was placed at one year, while the oldest, was placed at four years of age. Eighty per cent of the children in Group II were boys, while only twenty per cent, those placed at thirteen and fourteen months, were girls. In each group, there was one child who had been placed in a boarding home which later became an adoptive home.

The number of known replacements, including both private and agency homes, experienced by these children prior to the adoptive placement is shown in Table III.

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NUMBER OF KNOWN PRIVATE AND AGENCY REPLACEMENTS PRIOR
TO THE ADOPTIVE PLACEMENT

TABLE III.

Number of replacements	Group I	Group II
Two or under	6	2
Three	1	3
Four	um.	2
Five	1	1
Six		1
Seven -		1

The number of known replacements of the children in Group I total <u>twenty</u>, with <u>two</u> children experiencing <u>eight</u> of these replacements. The total number of replacements of the children in Group II was <u>forty-one</u>, with only <u>two</u> children having experienced <u>two</u> or fewer replacements. One of the children in this older age group experienced at least <u>nine</u> replacements. In most cases, the children who were moved frequently experienced these changes in their very early months.

Table IV shows the length of the boarding home period immediately preceding the adoptive placement for both groups of children.

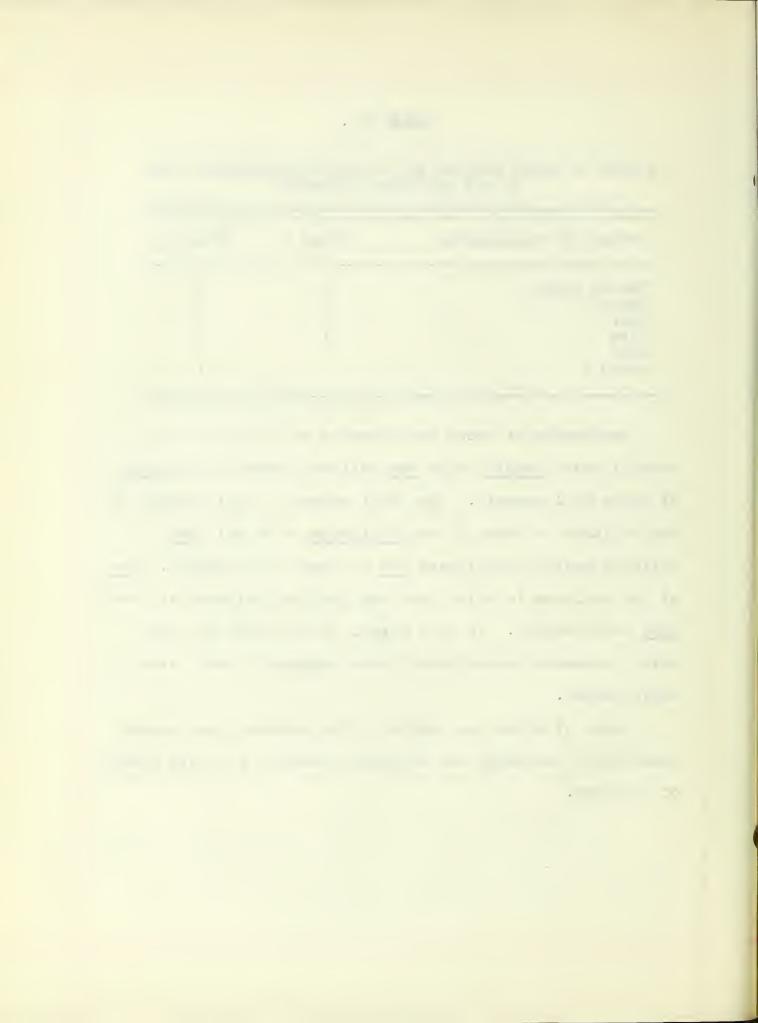


TABLE IV.

DURATION OF THE BOARDING PLACEMENT IMMEDIATELY PRECEDING THE ADOPTIVE PLACEMENT

Number of months of the ast boarding placement	Group I	Group II
0 - 3.9	8	-
4 - 7.9 8 - 11.9	-	1 5
12 - 15.9	-	i
16 - 19.9 20 -	-	2

Because of their early placement in the adoptive home, the children in the younger group all had comparatively short boarding placements, even when this was one consistent experience. Three of the children in Group II had experienced no other home than this boarding home which they left to go into the adoptive home. The one child who had been in his last boarding home twenty or more months had gone there directly from the hospital after birth. This child was one of the two who were placed in boarding homes which later became adoptive homes. The age at which the children in Group II went into their last boarding home ranged from seven days to three years.

Table V is an analysis, according to age groups, of the cases presented, and these are classified according to the degree of symptomatic behavior prior to and following the adoptive placement.

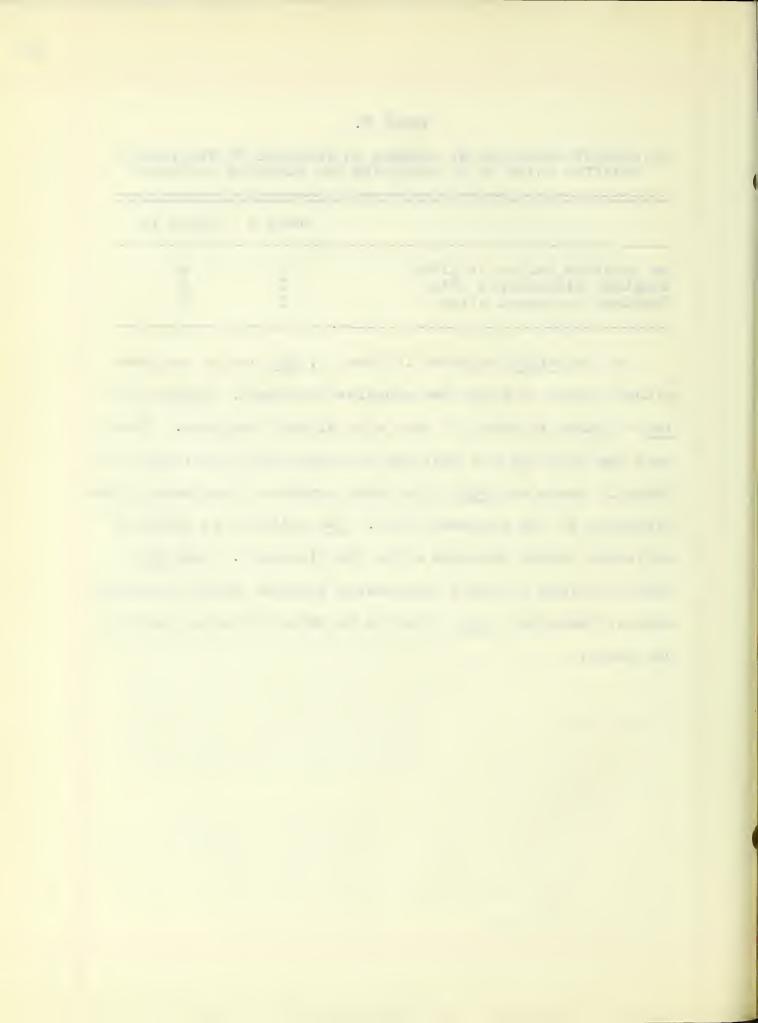
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TABLE V.

ADJUSTMENT SUGGESTED BY ABSENCE OR PRESENCE OF SYMPTOMATIC BEHAVIOR PRIOR TO OR FOLLOWING THE ADOPTIVE PLACEMENT

	Group I	Group II
No symptoms before or after	6	4
Symptoms disappeared after	1	2
Symptoms decreased after	1	4

of the eight children in Group I, six had no symptoms either before or after the adoptive placement. Four of the ten children in Group II were also without symptoms. These were the four who had just one boarding home experience. In Group I, there was one child whose symptoms disappeared after placement in the permanent home. Two children in Group II no longer showed symptoms after the placement. Only one child in Group I showed symptomatic behavior after placement, whereas there were four children in Group II whose symptoms continued.



#### CHAPTER V

#### CONCLUSIONS

The purpose of this thesis was to evaluate the emotional adjustment of children placed for adoption by the New Bedford Child and Family Service in the years 1946-1947. The writer has attempted to determine some of the factors which have contributed to the successful adjustment of the eighteen cases studied. The question was posed as to what value, if any, is to be gained, so far as the child's emotional adjustment is concerned, from permanent placement in an adoptive home during the first few months of life. It was the writer's intention to determine what, if any, relationship exists between the successful adoptive adjustment and the age at the time of the adoptive placement, the number of replacements prior to it, and the duration of the boarding home placement immediately preceding the adoptive placement.

Although this number of cases is not sufficiently large to permit valid statistical conclusions, the writer feels that, through the classification of the cases according to the presence or absence of symptomatic behavior, a certain relationship has been suggested between the above mentioned factors and the child's emotional adjustment in the adoptive home.

In analyzing the evidence of adjustment prior to and

• .

following the adoptive placements, it was found that, but with two exceptions, the younger group of children showed less evidence of insecurity and anxiety than did the older children. The two children in the younger group who showed anxiety, either before or after placement, had both experienced great frustration and deprivation through early and frequent replacements, thus accounting for their greater insecurity. The only child in this younger group whose symptoms continued after placement had not only experienced a large number of replacements, but was also the oldest child in the group. was exactly six months old at the time of placement. The fact that the obvious symptoms which one child in this younger group showed prior to placement at four and a half months disappeared immediately, although he also had experienced very frequent replacements, would give some indication of the importance of even a month or two at this most important period.

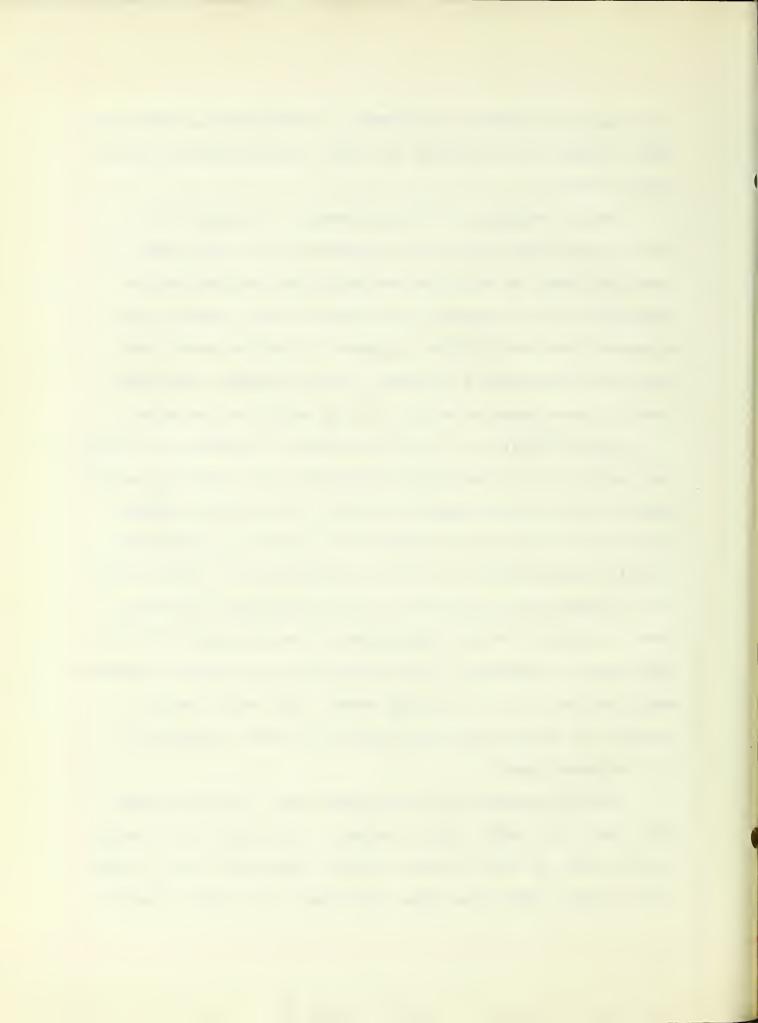
In contrast to the younger group, the children in the older age group showed a larger number of symptoms and more disturbing ones. All but four of the older children exhibited symptoms of insecurity either before, or after, placement in the permanent home. These four children, although older, had life experiences approximating those of the children placed early. All of these children had only one consistent boarding home experience, with warm and devoted boarding parents, from the time of discharge from the hospital after birth up to

the time of the adoptive placement. Consequently, they were able to gain security which the other children in this group did not have.

Further evidence of the importance of a consistent boarding home experience was suggested by the fact that, in the older group of children who exhibited symptoms before placement in the adoptive home, the two whose symptoms disappeared immediately after placement in the permanent home had also experienced a long and, to some extent, satisfying boarding home experience prior to the adoptive placement.

The fact that, of this older group of children, four had very definite symptoms which continued after placement in the adoptive home would suggest a certain relationship between the degree of adjustment possible and the age at placement, as well as the number of previous replacements. While these four children all had experienced one consistent boarding home for periods ranging from nine to twelve months prior to the adoptive placement, they had experienced frequent replacements before the last boarding home. This would seem to account for their continuing insecurity after placement in the permanent home.

The facts gained from this study would seem to suggest that there is a very real advantage in placing a child early in his life, so that he can, from the beginning, gain a sense of security. While the older child may, to a certain extent



gain this security at a later age, it would seem, from the evidence, that, for him, emotional adjustment is more difficult. Because of his early period of insecurity and anxiety, he is inevitably damaged in the total relationship area even though he may be able to find a certain degree of contentment within the adoptive family.

Approved,

Richard K. Conant

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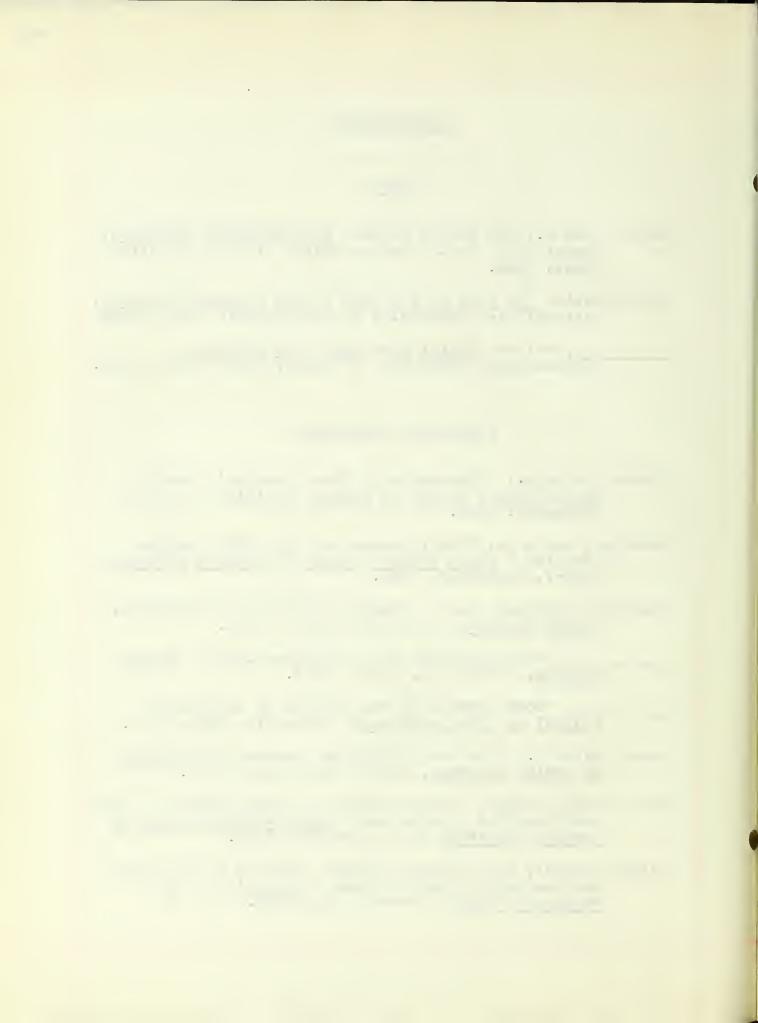
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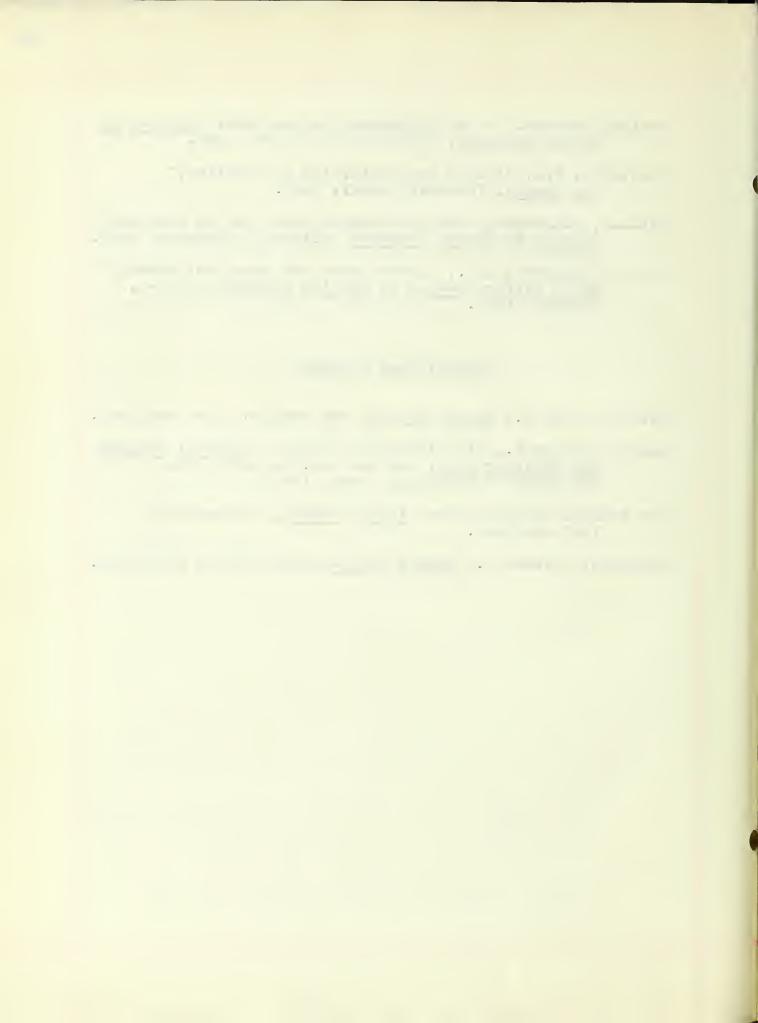
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APPENDIX



### NATURAL PARENTS

Age
Nationality
Religion
Education
School Adjustment
Work Experience
Work Adjustment
Marital Status
Economic Status
Family Relationships
Social Adjustment
Attitude toward child
Mental Ability
Personality Characteristics

SCHEDULE NO. II

# ADOPTIVE PARENTS

Age Nationality Religion Education School Adjustment Work Experience Work Adjustment Economic Status Community Standing Family Relationships Social Adjustment Mental Ability Personality Characteristics Reason applied for child Requirements for child Reaction when met child Feeling about child after placement 

#### SCHEDULE NO. III

### ADOPTED CHILD

# Before Placement for Adoption

Age when first known to the agency
Sex
Potential Mental Ability (Psychological Findings)
Physical Development (Medical Reports)
Emotional Adjustment (Caseworker's Observation)
Boarding Home Experience
Number of Replacements
Age at time of Replacements
Length of stay in each home
Adjustment in boarding home

# After Placement for Adoption

Age at time of placement
Reaction to placement
Physical Development
Emotional Adjustment
Reaction to Adoptive Family
Mother
Father
Other children





